

#### Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid

600 Washington Street Boston, MA 02111 www.mass.gov/masshealth

> MassHealth Transmittal Letter LAB-33 February 2009

TO: Independent Clinical Laboratories Participating in MassHealth

FROM: Tom Dehner, Medicaid Director

RE: Independent Clinical Laboratory Manual (2009 HCPCS)

This letter transmits revisions to the service codes in the *Independent Clinical Laboratory Manual*. The Centers for Medicare & Medicaid Services (CMS) have revised the Healthcare Common Procedure Coding System (HCPCS) for 2009. The revised Subchapter 6 is effective for dates of service on or after January 1, 2009. For dates of service on or after January 1, 2009, you must use the new codes in order to obtain reimbursement.

If you wish to obtain a fee schedule, you may download the Division of Health Care Finance and Policy (DHCFP) regulations at no cost at <a href="www.mass.gov/dhcfp">www.mass.gov/dhcfp</a>. You may also purchase a paper copy of DHCFP regulations from either the Massachusetts State Bookstore or from DHCFP (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

Telephone: 617-727-2834 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

#### MassHealth Web Site

This transmittal letter and attached pages are available on the MassHealth Web site at 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 <a href="mailto:providersupport@mahealth.net">providersupport@mahealth.net</a>, or fax your inquiry to 617-988-8974.

MassHealth Transmittal Letter LAB-33 February 2009 Page 2

#### **NEW MATERIAL**

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

## Independent Clinical Laboratory Manual

Pages 6-1 through 6-34

## **OBSOLETE MATERIAL**

(The pages listed here are no longer in effect.)

# Independent Clinical Laboratory Manual

Pages 6-1 through 6-36 — transmitted by Transmittal Letter LAB-32

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-1
Independent Clinical Laboratory Manual	Transmittal Letter LAB-33	<b>Date</b> 01/01/09

Service

<u>Code</u> <u>Service Description</u>

MassHealth pays for the services represented by the codes listed in Subchapter 6 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 405.000 and 450.000. An independent clinical laboratory may request prior authorization for any medically necessary service reimbursable under the federal Medicaid Act in accordance with 130 CMR 450.144, 42 U.S.C. 1396d(a), and 42 U.S.C. 1396d(r)(5) for a MassHealth Standard or CommonHealth member younger than 21 years of age, even if it is not designated as covered or payable in Subchapter 6 of the *Independent Clinical Laboratory Manual*.

#### Legend:

IC: Claim requires individual consideration. See 130 CMR 401.419.407 and 130 CMR 450.271 for more information.

PA: Service requires prior authorization. See 130 CMR 450.303 for more information.

#### **PATHOLOGY AND LABORATORY**

#### **ORGAN OR DISEASE-ORIENTED PANELS**

These panels were developed for coding purposes only and should not be interpreted as clinical parameters. The tests listed with each panel identify the defined components of that panel. These panel components are not intended to limit the performance of other tests. If one performs tests in addition to those specifically indicated for a particular panel, those tests should be reported separately in addition to the panel code.

Service Code	Service Description
80047	Basic metabolic panel (Calcium ionized) (This panel must include the following: Calcium, ionized (82330), Carbon dioxide (82374), Chloride (82435), Creatinine (82565), Glucose (82947),
80048	Potassium (84132), Sodium (84295), and Urea nitrogen (BUN) (84520).) Basic metabolic panel (Calcium, total) (This panel must include the following: Calcium, total (82310), Carbon dioxide (82374), Chloride (82435), Creatinine (82565), Glucose (82947), Potassium (84132), Sodium (84295), and Urea nitrogen (BUN) (84520).)
80050	General health panel (This panel must include the following: Comprehensive metabolic panel (80053), Blood count, complete (CBC), automated and automated differential (85025 or 85027 and 85004) or Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009), and Thyroid stimulating hormone (TSH) (84443).)
80051	Electrolyte panel (This panel must include the following: Carbon dioxide (82374), Chloride (82435), Potassium (84132), and Sodium (84295).)
80053	Comprehensive metabolic panel (This panel must include the following: Albumin (82040), Bilirubin, total (82247), Calcium, total (82310), Carbon dioxide (bicarbonate) (82374), Chloride (82435), Creatinine (82565), Glucose (82947), Phosphatase, alkaline (84075), Potassium (84132), Protein, total (84155), Sodium (84295), Transferase, alanine amino (ALT) (SGPT) (84460), Transferase, aspartate amino (AST) (SGOT) (84450), and Urea nitrogen (BUN) (84520).)
80055	Obstetric panel (This panel must include the following: Blood count, complete (CBC), automated and automated differential WBC count (85025 or 85027 and 85004) or Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009), Hepatitis B

# Commonwealth of Massachusetts MassHealth Provider Manual Series Subchapter Number and Title 6. Service Codes and Descriptions Transmittal Letter LAB-33 Date 01/01/09

601 <u>Laboratory Service Codes and Descriptions</u> (cont.)

#### Service

#### <u>Code</u> <u>Service Description</u>

surface antigen (HBsAg) (87340), Antibody, rubella (86762), Syphilis test, qualitative (e.g., VDRL, RPR, ART) (86592), Antibody screen, RBC, each serum technique (86850), Blood typing, ABO (86900), and Blood typing, Rh (D) (86901).)

- Lipid panel (This panel must include the following: Cholesterol, serum, total (82465), Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718), and Triglycerides (84478).)
- Renal function panel (This panel must include the following: Albumin (82040), Calcium, total (82310), Carbon dioxide (bicarbonate) (82374), Chloride (82435), Creatinine (82565), Glucose (82947), Phosphorus inorganic (phosphate) (84100), Potassium (84132), Sodium (84295), and Urea nitrogen (BUN) (84520).)
- Acute hepatitis panel (This panel must include the following: Hepatitis A antibody (HAAb), IgM antibody (86709), Hepatitis B core antibody (HBcAb), IgM antibody (86705), Hepatitis B surface antigen (HBsAg) (87340), and Hepatitis C antibody (86803).)
- Hepatic function panel (This panel must include the following: Albumin (82040), Bilirubin, total (82247), Bilirubin, direct (82248), Phosphatase, alkaline (84075), Protein, total (84155), Transferase, alanine amino (ALT) (SGPT) (84460), and Transferase, aspartate amino (AST) (SGOT) (84450).)

#### **DRUG TESTING**

The following list contains examples of drugs or classes of drugs that are commonly assayed by qualitative screen, followed by confirmation with a second method.

Alcohols

**Amphetamines** 

**Barbiturates** 

Benzodiazepines

Cocaine and metabolites

Methadones

Methaqualones

Opiates

Phencyclidines

Phenothiazines

Propoxyphenes

Tetrahydrocannabinoids

Tricyclic antidepressants

Confirmed drugs may also be quantitated.

Use 80100 for each multiple drug class chromatographic procedure. Use 80102 for each procedure necessary for confirmation. For chromatography, each combination of stationary and mobile phase is to be counted as one procedure. For example, if detection of three drugs by chromatography requires one stationary phase with three mobile phases, use 80100 three times. However, if multiple drugs can be detected using a single analysis (e.g., one stationary phase with one mobile phase), use 80100 only once.

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-3
Independent Clinical Laboratory Manual	Transmittal Letter	Date
	LAB-33	01/01/09

Service

<u>Code</u> <u>Service Description</u>

For quantitation of drugs screened, use appropriate code in Chemistry section (82000-84999) or Therapeutic Drug Assay section (80150-80299).

80100 Drug screen, qualitative; multiple drug classes chromatographic method, each procedure
80101 single drug class method (e.g., immunoassay, enzyme assay), each drug class
80102 Drug confirmation, each procedure
80103 Tissue preparation for drug analysis

#### THERAPEUTIC DRUG ASSAYS

The material for examination may be from any source. Examination is quantitative. For nonquantitative testing, see drug testing (80100-80103).

00150	
80150	Amikacin
80152	Amitriptyline
80154	Benzodiazepines
80156	Carbamazepine; total
80157	free
80158	Cyclosporine
80160	Desipramine
80162	Digoxin
80164	Dipropylacetic acid (valproic acid)
80166	Doxepin
80168	Ethosuximide
80170	Gentamicin
80172	Gold
80173	Haloperidol
80174	Imipramine
80176	Lidocaine
80178	Lithium
80182	Nortriptyline
80184	Phenobarbital
80185	Phenytoin; total
80186	free
80188	Primidone
80190	Procainamide
80192	with metabolites (e.g., n-acetyl procainamide)
80194	Quinidine
80195	Sirolimus
80196	Salicylate
80197	Tacrolimus
80198	Theophylline
80200	Tobramycin
80201	Topiramate
80202	Vancomycin

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-4
Independent Clinical Laboratory Manual	Transmittal Letter LAB-33	<b>Date</b> 01/01/09

Service Code	Service Description
80299	Quantitation of drug, not elsewhere specified

# EVOCATIVE/SUPPRESSION TESTING

80400	ACTH stimulation panel; for adrenal insufficiency (This panel must include the following: Cortisol (82533 x 2).)
80402	for 21 hydroxylase deficiency (This panel must include the following: Cortisol (82533 x 2) and 17 hydroxyprogesterone (83498 x 2).)
80406	for 3 beta-hydroxydehydrogenase deficiency (This panel must include the following: Cortisol (82533 x 2) and 17 hydroxypregnenolone (84143 x 2).)
80408	Aldosterone suppression evaluation panel (e.g., saline infusion) (This panel must include the following: Aldosterone (82088 x 2) and Renin (84244 x 2).)
80410	Calcitonin stimulation panel (e.g., calcium, pentagastrin) (This panel must include the following: Calcitonin (82308 x 3).)
80412	Corticotropic releasing hormone (CRH) stimulation panel (This panel must include the following: Cortisol (82533 x 6) and Adrenocorticotropic hormone (ACTH) (82024 x 6).)
80414	Chorionic gonadotropin stimulation panel; testosterone response (This panel must include the following: Testosterone (84403 x 2 on three pooled blood samples).)
80415	estradiol response (This panel must include the following: Estradiol (82670 x 2 on three pooled blood samples).)
80416	Renal vein renin stimulation panel (e.g., captopril) (This panel must include the following: Renin (84244 x 6).)
80417	Peripheral vein renin stimulation panel (e.g., captopril) (This panel must include the following: Renin (84244 x 2).)
80418	Combined rapid anterior pituitary evaluation panel (This panel must include the following: Adrenocorticotropic hormone (ACTH) (82024 x 4), Luteinizing hormone (LH) (83002 x 4), Follicle stimulating hormone (FSH) (83001 x 4), Prolactin (84146 x 4), Human growth hormone (HGH) (83003 x 4), Cortisol (82533 x 4), and Thyroid stimulating hormone (TSH) (84443 x 4).)
80420	Dexamethasone suppression panel, 48 hour (This panel must include the following: Free cortisol, urine (82530 x 2), Cortisol (82533 x 2), and Volume measurement for timed collection (81050 x 2).) (For single dose dexamethasone, use 82533.)
80422	Glucagon tolerance panel; for insulinoma (This panel must include the following: Glucose (82947 x 3) and Insulin (83525 x 3).)
80424	for pheochromocytoma (This panel must include the following: Catecholamines, fractionated (82384 x 2).)
80426	Gonadatropin releasing hormone stimulation panel (This panel must include the following: Follicle stimulating hormone (FSH) (83001 x 4) and Luteinizing hormone (LH) (83002 x 4).)
80428	Growth hormone stimulation panel (e.g., arginine infusion, l-dopa administration). (This panel must include the following: Human growth hormone (HGH) (83003 x 4).)
80430	Growth hormone suppression panel (glucose administration) (This panel must include the following: Glucose (82947 x 3) and Human growth hormone (HGH) (83003 x 4).)
80432	Insulin-induced C-peptide suppression panel (This panel must include the following: Insulin (83525), C-peptide (84681 x 5), and Glucose (82947 x 5).)
80434	Insulin tolerance panel; for ACTH insufficiency (This panel must include the following: Cortisol (82533 x 5) and Glucose (82947 x 5).)
80435	for growth hormone deficiency (This panel must include the following: Glucose (82947 x 5) and

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-5
Independent Clinical Laboratory Manual	Transmittal Letter LAB-33	<b>Date</b> 01/01/09

Service Code	Service Description
Couc	
	Human growth hormone (HGH) (83003 x 5).)
80436	Metyrapone panel (This panel must include the following: Cortisol (82533 x 2) and 11 deoxycortisol (82634 x 2).)
80438	Thyrotropin releasing hormone (TRH) stimulation panel; one hour (This panel must include the following: Thyroid stimulating hormone (TSH) (84443 x 3).)
80439	two hours (This panel must include the following: Thyroid stimulating hormone (TSH) (84443 x 4).)
80440	for hyperprolactinemia (This panel must include the following: Prolactin (84146 x 3).)
	<u>URINALYSIS</u>
81000	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, with microscopy
81001	automated, with microscopy
81002	non-automated, without microscopy
81003	automated, without microscopy
81005	Urinalysis; qualitative or semiquantitative, except immunoassays
81007	· · · · · · · · · · · · · · · · · · ·
	bacteriuria screen, except by culture or dipstick (specify type)
81015	bacteriuria screen, except by culture or dipstick (specify type) microscopic only
81015 81020	bacteriuria screen, except by culture or dipstick (specify type) microscopic only two or three glass test
81015 81020 81025	bacteriuria screen, except by culture or dipstick (specify type) microscopic only two or three glass test Urine pregnancy test, by visual color comparison methods
81015 81020	bacteriuria screen, except by culture or dipstick (specify type) microscopic only two or three glass test

## **CHEMISTRY**

The material for examination may be from any source. Examination is quantitative unless specified.

Clinical information derived from the results of laboratory data that is mathematically calculated (e.g., free thyroxine index (T7)) is considered part of the test procedure and therefore is not a separately reportable service.

82000	Acetaldehyde, blood
82003	Acetaminophen
82009	Acetone or other ketone bodies, serum; qualitative
82010	quantitative
82013	Acetylcholinesterase
82016	Acylcarnitines; qualitative, each specimen
82017	quantitative, each specimen
82024	Adrenocorticotropic hormone (ACTH)
82030	Adenosine; 5-monophosphate, cyclic (cyclic AMP)
82040	Albumin; serum, plasma or whole blood
82042	urine or other source, quantitative, each specimen
82043	urine, microalbumin, quantitative

<b>Commonwealth of Massachusetts</b>
MassHealth
Provider Manual Series

Page 6-6

Independent Clinical Laboratory Manual

simultaneous determinations

**Transmittal Letter** LAB-33

Date 01/01/09

Service	
Code	Service Description
82044	urine, microalbumin, semiquantitative (e.g., reagent strip assay)
82045	ischemia modified
82055	Alcohol (ethanol); any specimen except breath
82085	Aldolase
82088	Aldosterone
82101	Alkaloids, urine, quantitative
82103	Alpha-1-antitrypsin; total
82104	phenotype
82105	Alpha-fetoprotein; serum
82106	amniotic fluid
82107	Alpha-fetoprotein (AFP); AFP-L3 fraction isoform and total AFP (including ratio)
82108	Aluminum
82120	Amines, vaginal fluid, qualitative
82127	Amino acids; single, qualitative, each specimen
82128	multiple, qualitative, each specimen
82131	single, quantitative, each specimen
82135	Aminolevulinic acid, delta (ALA)
82136	Amino acids, two to five amino acids, quantitative, each specimen
82139	Amino acids, six or more amino acids, quantitative, each specimen
82140	Ammonia
82143	Amniotic fluid scan (spectrophotometric)
82145	Amphetamine or methamphetamine
82150	Amylase
82154	Androstanediol glucuronide
82157	Androstenedione Androsterone
82160 82163	
82163 82164	Angiotensin II Angiotensin I - converting enzyme (ACE)
82172	Apolipoprotein, each
82175	Arsenic
82173	Ascorbic acid (vitamin C), blood
82190	Atomic absorption spectroscopy, each analyte
82205	Barbiturates, not elsewhere specified
82232	Beta-2 microglobulin
82239	Bile acids; total
82240	cholylglycine
82247	Bilirubin; total
82248	direct
82252	feces, qualitative
82261	Biotinidase, each specimen
82270	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; feces, consecutive collected specimens
	with single determination, for colorectal neoplasm screening (i.e., patient was provided three cards or
	single triple card for consecutive collection)
82271	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; other sources
82272	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative, feces, one to three simultaneous
	determinations, performed for other than colorectal neoplasm screening
82274	Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative, feces, one to three

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-7
Indonondant Clinical Laboratory Manual	Transmittal Letter	Date
Independent Clinical Laboratory Manual	LAB-33	01/01/09

Service	
Code	Service Description
82286	Bradykinin
82300	Cadmium
82306	Calcifediol (25-OH vitamin D-3)
82307	Calciferol (vitamin D)
82308	Calcitonin
82310	Calcium; total
82330	ionized
82331	after calcium infusion test
82340	urine quantitative, timed specimen
82355	Calculus; qualitative analysis
82360	quantitative analysis, chemical
82365	infrared spectroscopy
82370	X-ray diffraction
82373	Carbohydrate deficient transferrin
82374	Carbon dioxide (bicarbonate)
82375	Carboxyhemoglobin; quantitative
82376	qualitative
82378	Carcinoembryonic antigen (CEA)
82379	Carnitine (total and free), quantitative, each specimen
82380	Carotene
82382	Catecholamines; total urine
82383	blood
82384	fractionated
82387	Cathepsin-D
82390	Ceruloplasmin
82397	Chemiluminescent assay
82415	Chloramphenicol
82435	Chloride; blood
82436	urine
82438	other source
82441	Chlorinated hydrocarbons, screen
82465	Cholesterol, serum or whole blood, total
82480	Cholinesterase; serum
82482	RBC
82485	Chondroitin B sulfate, quantitative
82486	Chromatography, qualitative; column (e.g., gas liquid or HPLC), analyte not elsewhere specified
82487	paper, one-dimensional, analyte not elsewhere specified
82488	paper, two-dimensional, analyte not elsewhere specified
82489	thin layer, analyte not elsewhere specified
82491	Chromatography, quantitative, column (e.g., gas liquid or HPLC); single analyte not elsewhere specified,
02.71	single stationary and mobile phase
82492	multiple analytes, single stationary and mobile phase
82495	Chromium
82507	Citrate
82520	Cocaine or metabolite
82523	Collagen cross links, any method
82525	Copper
82528	Corticosterone

#### Commonwealth of Massachusetts MassHealth Provider Manual Series

Subchapter Number and Title
6. Service Codes and Descriptions

Page 6-8

Independent Clinical Laboratory Manual

Transmittal Letter
LAB-33

01/01/09

Date

## 601 <u>Laboratory Service Codes and Descriptions</u> (cont.)

Fat or lipids, feces; qualitative

82705

Service	
<u>Code</u>	Service Description
82530	Cortisol; free
82533	total
82540	Creatine
82541	Column chromatography/mass spectrometry (e.g., GC/MS, or HPLC/MS), analyte not elsewhere
	specified; qualitative, single stationary and mobile phase
82542	quantitative, single stationary and mobile phase
82543	stable isotope dilution, single analyte, quantitative, single stationary and mobile phase
82544	stable isotope dilution, multiple analytes, quantitative, single stationary and mobile phase
82550	Creatine kinase (CK), (CPK); total
82552	isoenzymes
82553	MB fraction only
82554	isoforms
82565	Creatinine; blood
82570	other source
82575	clearance
82585	Cryofibrinogen
82595	Cryoglobulin, qualitative or semi-quantitative (e.g., cryocrit)
82600	Cyanide
82607	Cyanocobalamin (vitamin B-12)
82608	unsaturated binding capacity
82610	Cystatin C
82615	Cystine and homocystine, urine, qualitative
82626	Dehydroepiandrosterone (DHEA)
82627	Dehydroepiandrosterone-sulfate (DHEA-S)
82633	Desoxycorticosterone, 11-
82634	Deoxycortisol, 11-
82638	Dibucaine number
82646	Dihydrocodeinone
82649	Dihydromorphinone
82651	Dihydrotestosterone (DHT)
82652	Dihydroxyvitamin D, 1, 25-
82654	Dimethadione
82656	Elastase, pancreatic (EL-1), fecal, qualitative or semi-quantitative
82657	Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; nonradioactive substrate,
	each specimen
82658	radioactive substrate, each specimen
82664	Electrophoretic technique, not elsewhere specified
82666	Epiandrosterone
82668	Erythropoietin
82670	Estradiol
82671	Estrogens; fractionated
82672	total
82677	Estriol
82679	Estrone
82690	Ethchlorvynol
82693	Ethylene glycol
82696	Etiocholanolone

<b>Commonwealth of Massachusetts</b>		
MassHealth		
Provider Manual Series		

**Page** 6-9

Independent Clinical Laboratory Manual

Transmittal Letter
LAB-33

01/01/09

Date

Service	
Code	Service Description
Code	Service Description
82710	quantitative
82715	Fat differential, feces, quantitative
82725	Fatty acids, nonesterified
82726	Very long chain fatty acids
82728	Ferritin
82731	Fetal fibronectin, cervicovaginal secretions, semi-quantitative
82735	Fluoride
82742	Flurazepam
82746	Folic acid; serum
82747	RBC
82757	Fructose, semen
82759	Galactokinase, RBC
82760	Galactose
82775	Galactose-1-phosphate uridyl transferase; quantitative
82776	screen
82784	Gammaglobulin; IgA, IgD, IgG, IgM, each
82785	IgE
82787	immunoglobulin subclasses (IgG1, 2, 3, or 4), each
82800	Gases, blood, pH only
82803	Gases, blood, any combination of pH, pCO <sub>2</sub> , pO <sub>2</sub> , CO <sub>2</sub> , HCO <sub>3</sub> (including calculated O <sub>2</sub>
	saturation)
82805	with O <sub>2</sub> saturation, by direct measurement, except pulse oximetry
82810	Gases, blood, O <sub>2</sub> saturation only, by direct measurement, except pulse oximetry
82820	Hemoglobin-oxygen affinity (pO <sub>2</sub> for 50% hemoglobin saturation with oxygen)
82926	Gastric acid, free and total, each specimen
82928	Gastric acid, free or total; each specimen
82938	Gastrin after secretin stimulation
82941	Gastrin
82943	Glucagon
82945	Glucose, body fluid, other than blood
82946	Glucagon tolerance test
82947	Glucose; quantitative, blood (except reagent strip)
82948	blood, reagent strip
82950	post-glucose dose (includes glucose)
82951	tolerance test (GTT), three specimens (includes glucose)
82952	tolerance test, each additional beyond three specimens
82953	tolbutamide tolerance test
82955	Glucose-6-phosphate dehydrogenase (G6PD); quantitative
82960	screen
82963	Glucosidase, beta
82965	Glutamate dehydrogenase
82975	Glutamine (glutamic acid amide)
82977	Glutamyltransferase, gamma (GGT)
82978	Glutathione
82979	Glutathione reductase, RBC
82980	Glutethimide
82985	Glycated protein
83001	Gonadotropin; follicle-stimulating hormone (FSH)

#### Commonwealth of Massachusetts MassHealth Provider Manual Series

Subchapter Number and Title
6. Service Codes and Descriptions

**Page** 6-10

**Transmittal Letter** 

Date

Independent Clinical Laboratory Manual

LAB-33 01/01/09

Service	
Code	Service Description
· · · · · · · · · · · · · · · · · · ·	
83002	luteinizing hormone (LH)
83003	Growth hormone, human (HGH) (somatotropin)
83008	Guanosine monophosphate (GMP), cyclic
83009	Helicobacter pylori, blood test analysis for urease activity, non-reactive isotope (e.g., C-13)
83010 83012	Haptoglobin; quantitative
83012	phenotypes  Helicahaeter gyleria brooth test analysis for yrossa asitivity, non-radioactive isotope (a.c. C. 12)
83013	Helicobacter pylori; breath test analysis for urease acitivity, non-radioactive isotope (e.g., C-13) drug administration
83014	Heavy metal (e.g., arsenic, barium, beryllium, bismuth, antimony, mercury); screen
83018	quantitative, each
83020	Hemoglobin fractionation and quantitation; electrophoresis (e.g., A2, S, C, and/or F)
83021	chromatography (e.g., A2, S, C, and/or F)
83026	Hemoglobin; by copper sulfate method, non-automated
83030	F (fetal), chemical
83033	F (fetal), qualitative
83036	glycosylated (A1C)
83037	glycosylated (A1C) by device cleared by FDA for home use
83045	methemoglobin, qualitative
83050	methemoglobin, quantitative
83051	plasma
83055	sulfhemoglobin, qualitative
83060	sulfhemoglobin, quantitative
83065	thermolabile
83068	unstable, screen
83069	urine
83070	Hemosiderin; qualitative
83071	quantitative
83080	b-Hexosaminidase, each assay
83088	Histamine
83090	Homocystine
83150	Homovanillic acid (HVA)
83491	Hydroxycorticosteroids, 17- (17-OHCS)
83497	Hydroxyindolacetic acid, 5- (HIAA)
83498	Hydroxyprogesterone, 17-d
83499	Hydroxyprogesterone, 20-
83500	Hydroxyproline; free
83505	total
83516	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen, qualitative or
83518	semiquantitative; multiple step method single step method (e.g., reagent strip)
83519	Immunoassay, analyte, quantitative; by radiopharmaceutical technique (e.g., RIA)
83520	not otherwise specified
83525	Insulin; total
83527	free
83528	Intrinsic factor
83540	Iron
83550	Iron-binding capacity
83570	Isocitric dehydrogenase (IDH)

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-11
Independent Clinical Laboratory Manual	Transmittal Letter	Date
Independent Clinical Laboratory Manual	LAB-33	01/01/09

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Service	Comics Description
Code	Service Description
83582	Ketogenic steroids, fractionation
83586	Ketosteroids, 17- (17-KS); total
83593	fractionation
83605	Lactate (lactic acid)
83615	Lactate dehydrogenase (LD), (LDH);
83625	isoenzymes, separation and quantitation
83630	Lactoferrin, fecal; qualitative
83631	quantitative
83632	Lactogen, human placental (HPL) human chorionic somatomammotropin
83633	Lactose, urine; qualitative
83634	quantitative
83655	Lead
83661	Fetal lung maturity assessment; lecithin sphingomyelin (L/S) ratio
83662	foam stability test
83663	fluorescence polarization
83664	lamellar body density
83670	Leucine aminopeptidase (LAP)
83690	Lipase
83695	Lipoprotein (a)
83698	Lipoprotein-associated phospholipase A2
83700	Lipoprotein, blood; electrophoretic separation and quantitation
83701	high resolution fractionation and quantitation of lipoproteins including lipoprotein subclasses when
83704	performed (e.g.,electrophoresis, ultracentrifugation) quantitation of lipoprotein particle numbers and lipoprotein particle subclasses (e.g., by nuclear
83704	magnetic resonance spectroscopy)
83718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)
83719	direct measurement, VLDL cholesterol
83721	direct measurement, LDL cholesterol
83727	Luteinizing-releasing factor (LRH)
83735	Magnesium
83775	Malate dehydrogenase
83785	Manganese
83788	Mass spectrometry and tandem mass spectrometry (MS, MS/MS), analyte not elsewhere specified;
	qualitative, each specimen
83789	quantitative, each specimen
83805	Meprobamate
83825	Mercury, quantitative
83835	Metanephrines
83840	Methadone
83857	Methemalbumin
83858	Methsuximide
83864	Mucopolysaccharides, acid; quantitative
83866	screen
83872	Mucin, synovial fluid (Ropes test)
83873	Myelin basic protein, cerebrospinal fluid
83874	Myoglobin
83876	Myeloperoxidase (MPO)
83880	Natriuretic peptide

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-12
Independent Clinical Laboratory Manual	Transmittal Letter	Date
Independent Clinical Laboratory Manual	LAB-33	01/01/09

qualitative, each specimen

Opiate(s), drug and metabolites, each procedure

Organic acid, single, quantitative

83919

83921

83925

Service Code	Service Description
83883 83885	Nephelometry, each analyte not elsewhere specified Nickel
83887	Nicotine

#### **Molecular Diagnostics**

Codes 83890-83914 are intended for use with molecular diagnostic techniques for analysis of nucleic acids. These services are coded by procedure rather than analyte. Code separately for each procedure used in an analysis. For example, a procedure requiring isolation of DNA, restriction endonuclease digestion, electrophoresis, and nucleic acid probe amplification would be coded 83890, 83892, 83894, and 83898.

83890	Molecular diagnostics; molecular isolation or extraction, each nucleic acid type (ie, DNA or RNA)
83891	isolation or extraction of highly purified nucleic acid, each nucleic acid type (ie, DNA or RNA)
83892	enzymatic digestion, each enzyme treatment
83893	dot/slot blot production, each nucleic acid preparation
83894	separation by gel electrophoresis (e.g., agarose, polyacrylamide), each nucleic acid preparation
83896	nucleic acid probe, each
83897	nucleic acid transfer (e.g., Southern, Northern)
83898	amplification, target, each nucleic acid sequence
83900	amplification, target, multiplex, first 2 nucleic acid sequences
83901	amplification, target, multiplex, each additional nucleic acid sequence beyond 2 (List separately
	in addition to code for primary procedure.)
83902	reverse transcription
83903	mutation scanning, by physical properties (e.g., single strand conformational polymorphisms
	(SSCP), heteroduplex, denaturing gradient gel electrophoresis (DGGE), RNA'ase A), single
	segment, each
83904	mutation identification by sequencing, single segment, each segment
83905	mutation identification by allele specific transcription, single segment, each segment
83906	mutation identification by allele specific translation, single segment, each segment
83907	lysis of cells prior to nucleic acid extraction (e.g., stool specimens, paraffin embedded tissue), each specimen
83908	amplification, signal, each nucleic acid sequence
83909	separation and identification by high resolution technique (e.g., capillary electrophoresis), each
	nucleic acid preparation
83912	interpretation and report
83913	RNA stabilization
83914	Mutation identification by enzymatic ligation or primer extension, single segment, each segment (e.g.,
	oligonucleotide ligation assay (OLA), single base chain extension (SBCE) or allele-specific primer extension (ASPE))
83915	Nucleotidase 5'-
83916	Oligoclonal immune (oligoclonal bands)
83918	Organic acids; total, quantitative, each specimen

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-13
Independent Clinical Laboratory Manual	Transmittal Letter  LAB-33	<b>Date</b> 01/01/09

Service	
Code	Service Description
	•
83930	Osmolality; blood
83935	urine
83937	Osteocalcin (bone g1a protein)
83945	Oxalate
83950	Oncoprotein; HER-2/neu
83951	des-gamma-carboxy-prothrombin
83970	Parathormone (parathyroid hormone)
83986	pH, body fluid, except blood
83992	Phencyclidine (PCP)
83993	Calprotectin, fecal
84022	Phenothiazine
84030	Phenylalanine (PKU), blood
84035	Phenylketones, qualitative
84060	Phosphatase, acid; total
84066	prostatic
84075	Phosphatase, alkaline
84078	heat stable (total not included)
84080	isoenzymes
84081	Phosphatidylglycerol
84085	Phosphogluconate, 6-, dehydrogenase, RBC
84087	Phosphohexose isomerase
84100	Phosphorus inorganic (phosphate);
84105	urine
84106	Porphobilinogen, urine; qualitative
84110	quantitative
84119	Porphyrins, urine; qualitative
84120	quantitation and fractionation
84126	Porphyrins, feces; quantitative
84127	qualitative
84132	Potassium; serum, plasma or whole blood
84133	urine
84134	Prealbumin
84135	Pregnanediol
84138	Pregnanetriol
84140	Pregnenolone
84143	17-hydroxypregnenolone
84144	Progesterone
84146	Prolactin
84150	Prostaglandin, each
84152	Prostate specific antigen (PSA); complexed (direct measurement)
84153	total
84154	free  Protein total except by refrectometry, somm plasma or whole blood
84155	Protein, total, except by refractometry; serum, plasma or whole blood urine
84156	
84157 84160	other source (e.g., synovial fluid, cerebrospinal fluid) Protein, total, by refractometry, any source
84163	Pregnancy associated plasma protein A (PAPP-A)
84165	Protein; electrophoretic fractionation and quantitation, serum
01105	1 Totali, electrophototic fractionation and quantitation, serum

Commonwealth of Massachusetts
MassHealth
Provider Manual Series

**Page** 6-14

Independent Clinical Laboratory Manual

Transmittal Letter
LAB-33

**Date** 01/01/09

Service	
Code	Service Description
	· · · · · · · · · · · · · · · · · · ·
84166	Protein; electrophoretic fractionation and quantitation, other fluids with concentration (e.g, urine, CSF)
84181	Western Blot, with interpretation and report, blood or other body fluid
84182	Western Blot, with interpretation and report, blood or other body fluid, immunological probe for band
0.4202	identification, each
84202 84203	Protoporphyrin, RBC; quantitative
84206	screen Proinsulin
84207	Pyridoxal phosphate (vitamin B-6)
84210	Pyruvate
84220	Pyruvate kinase
84228	Quinine
84233	Receptor assay; estrogen
84234	progesterone
84235	endocrine, other than estrogen or progesterone (specify hormone)
84238	non-endocrine (specify receptor)
84244	Renin
84252	Riboflavin (vitamin B-2)
84255	Selenium
84260	Serotonin
84270	Sex hormone binding globulin (SHBG)
84275	Sialic acid
84285	Silica
84295	Sodium; serum, plasma or whole blood
84300	urine
84302	other source
84305	Somatomedin
84307	Somatostatin
84311	Spectrophotometry, analyte not elsewhere specified
84315	Specific gravity (except urine)
84375	Sugars, chromatographic, TLC or paper chromatography
84376	Sugars (mono-, di, and oligosaccharides); single qualitative, each specimen
84377	multiple qualitative, each specimen
84378	single quantitative, each specimen
84379 84392	multiple quantitative, each specimen
84402	Sulfate, urine Testosterone; free
84403	total
84425	Thiamine (vitamin B-1)
84430	Thiocyanate
84432	Thyroglobulin
84436	Thyroxine; total
84437	requiring elution (e.g., neonatal)
84439	free
84442	Thyroxine binding globulin (TBG)
84443	Thyroid-stimulating hormone (TSH)
84445	Thyroid-stimulating immune globulins (TSI)
84446	Tocopherol alpha (vitamin E)
84449	Transcortin (cortisol binding globulin)

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-15
Independent Clinical Laboratory Manual	Transmittal Letter LAB-33	<b>Date</b> 01/01/09

Service	
Code	Service Description
84450	Transferase; aspartate amino (AST) (SGOT)
84460	alanine amino (ALT) (SGPT)
84466	Transferrin
84478	Triglycerides
84479	Thyroid hormone (T3 or T4) uptake or thyroid hormone binding ratio (THBR)
84480	Triiodothyronine T3; total (TT-3)
84481	free
84482	reverse
84484	Troponin, quantitative
84485	Trypsin; duodenal fluid
84488	feces, qualitative
84490	feces, quantitative, 24-hour collection
84510	Tyrosine
84512	Troponin, qualitative
84520	Urea nitrogen; quantitative
84525	semiquantitative (e.g., reagent strip test)
84540	Urea nitrogen, urine
84545	Urea nitrogen, clearance
84550	Uric acid; blood
84560	other source
84577	Urobilinogen, feces, quantitative
84578	Urobilinogen, urine; qualitative
84580	quantitative, timed specimen
84583	semiquantitative
84585	Vanillylmandelic acid (VMA), urine
84586	Vasoactive intestinal peptide (VIP)
84588	Vasopressin (antidiuretic hormone, ADH)
84590	Vitamin A
84591	Vitamin, not otherwise specified
84597	Vitamin K
84600	Volatiles (e.g., acetic anhydride, carbon tetrachloride, dichloroethane, dichloromethane,
	diethylether, isopropyl alcohol, methanol)
84620	Xylose absorption test, blood and/or urine
84630	Zinc
84681	C-peptide
84702	Gonadotropin, chorionic (hCG); quantitative
84703	qualitative
84704	free beta chain
84999	Unlisted chemistry procedure (I.C.)

## **HEMATOLOGY AND COAGULATION**

#### Commonwealth of Massachusetts MassHealth Provider Manual Series

Subchapter Number and Title
6. Service Codes and Descriptions

**Page** 6-16

Independent Clinical Laboratory Manual

Transmittal Letter
LAB-33

01/01/09

Date

Service	
Code_	Service Description
· · · · · · · · · · · · · · · · · · ·	•
85004	Blood count; automated differential WBC count
85007	blood smear, microscopic examination with manual differential WBC count
85008	blood smear, microscopic examination without manual differential WBC count
85009	manual differential WBC count, buffy coat
85013	spun microhematocrit
85014	hematocrit (Hct)
85018	hemoglobin (Hgb)
85025	complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85027	complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count)
85032	manual cell count (erythrocyte, leukocyte, or platelet) each
85041	red blood cell (RBC), automated
85044	reticulocyte, manual
85045	reticulocyte, automated
85046	reticulocytes, automated, including one or more cellular parameters (e.g., reticulocyte hemoglobin
	content (CHr), immature reticulocyte fraction (IRF), reticulocyte volume [MRV], RNA content),
	direct measurement
85048	leukocyte (WBC), automated
85049	platelet, automated
85055	Reticulated platelet assay
85060	Blood smear, peripheral, interpretation by physician with written report
85097	Bone marrow, smear interpretation
85130	Chromogenic substrate assay
85170	Clot retraction
85175	Clot lysis time, whole blood dilution
85210	Clotting; factor II, prothrombin, specific
85220	factor V (AcG or proaccelerin), labile factor
85230	factor VII (proconvertin, stable factor)
85240	factor VIII (AHG), one stage
85244	factor VIII related antigen
85245	factor VIII, VW factor, ristocetin cofactor
85246	factor VIII, VW factor antigen
85247 85250	factor VIII, von Willebrand factor, multimetric analysis
85260	factor IX (PTC or Christmas) factor X (Stuart-Prower)
85270	factor XI (PTA)
85280	factor XII (Hageman)
85290	factor XIII (fibrin stabilizing)
85291	factor XIII (fibrin stabilizing), screen solubility
85292	prekallikrein assay (Fletcher factor assay)
85293	high molecular weight kininogen assay (Fitzgerald factor assay)
85300	Clotting inhibitors or anticoagulants; antithrombin III, activity
85301	antithrombin III, antigen assay
85302	protein C, antigen
85303	protein C, activity
85305	protein S, total
85306	protein S, free
85307	Activated Protein C (APC) resistance assay
	•

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-17
Independent Clinical Laboratory Manual	Transmittal Letter	Date
Independent Clinical Laboratory Manual	LAB-33	01/01/09

Service	
Code_	Service Description
couc	Service Description
85335	Factor inhibitor test
85337	Thrombomodulin
85345	Coagulation time; Lee and White
85347	activated
85348	other methods
85360	Euglobulin lysis
85362	Fibrin(ogen) degradation (split) products (FDP)(FSP); agglutination slide; semiquantitative
85366 85370	paracoagulation
85378	quantitative  Eibrin degradation products. D. dimer, qualitative or comiquentitative
85378 85379	Fibrin degradation products, D-dimer; qualitative or semiquantitative
85380	quantitative ultrasensitive (e.g., for evaluation for venous thromboembolism), qualitative or semiquantitative
85384	
85385	Fibrinogen; activity antigen
85390	Fibrinolysins or coagulopathy screen, interpretation and report
85396	Coagulation/fibrinolysis assay, whole blood (e.g., viscoelastic clot assessment), including use of any
03370	pharmacologic additive(s), as indicated, including interpretation and written report, per day
85397	Coagulation and fibronolysis, functional activity, not otherwise specified (eg, ADAMS-13), each
03371	analyte
85400	Fibrinolytic factors and inhibitors; plasmin
85410	alpha-2 antiplasmin
85415	plasminogen activator
85420	plasminogen, except antigenic assay
85421	plasminogen, except antigenic assay
85441	Heinz bodies; direct
85445	induced, acetyl phenylhydrazine
85460	Hemoglobin or RBCs, fetal, for fetomaternal hemorrhage; differential lysis (Kleihauer-Betke)
85461	rosette
85475	Hemolysin, acid
85520	Heparin assay
85525	Heparin neutralization
85530	Heparin-protamine tolerance test
85536	Iron stain, peripheral blood
85540	Leukocyte alkaline phosphatase with count
85547	Mechanical fragility, RBC
85549	Muramidase
85555	Osmotic fragility, RBC; unincubated
85557	incubated
85576	Platelet; aggregation (in vitro), each agent
85597	Platelet neutralization
85610	Prothrombin time
85611	substitution, plasma fractions, each
85612	Russell viper venom time (includes venom); undiluted
85613	diluted
85635	Reptilase test
85651	Sedimentation rate, erythrocyte; non-automated

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-18
Independent Clinical Laboratory Manual	Transmittal Letter LAB-33	<b>Date</b> 01/01/09

86243

86255

Fc receptor

601 <u>La</u>	boratory Service Codes and Descriptions (cont.)
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Service	
<u>Code</u>	Service Description
85652	automated
85660	Sickling of RBC, reduction
85670	Thrombin time; plasma
85675	titer
85705	Thromboplastin inhibition; tissue
85730	Thromboplastin time, partial (PTT); plasma or whole blood
85732	substitution, plasma fractions, each
85810	Viscosity
85999	Unlisted hematology and coagulation procedure (I.C.)
	IMMUNIOLOGY
	<u>IMMUNOLOGY</u>
86000	Agglutinins, febrile (e.g., Brucella, Francisella, Murine typhus, Q fever, Rocky Mountain
	spotted fever, scrub typhus), each antigen
86001	Allergen specific IgG; quantitative or semiquantitative, each allergen
86003	Allergen specific IgE; quantitative or semiquantitative, each allergen
86005	qualitative, multiallergen screen (dipstick, paddle, or disk)
86021	Antibody identification; leukocyte antibodies
86022	platelet antibodies
86023	platelet-associated immunoglobulin assay
86038	Antinuclear antibodies (ANA)
86039	titer
86060	Antistreptolysin 0; titer
86063	screen
86140	C-reactive protein
86141	high sensitivity (hsCRP)
86146	Beta 2 Glycoprotein I antibody, each
86147	Cardiolipin (phospholipid) antibody, each Ig class
86148	Anti-phosphatidylserine (phospholipid) antibody
86155	Chemotaxis assay, specify method
86156	Cold agglutinin; screen
86157	titer
86160	Complement; antigen, each component
86161	functional activity, each component
86162	total hemolytic (CH50)
86171	Complement fixation tests, each antigen
86185	Counterimmunoelectrophoresis, each antigen
86200	Cyclic citrullinated peptide (CCP), antibody
86215	Deoxyribonuclease, antibody
86225	Deoxyribonucleic acid (DNA), antibody; native or double stranded
86226	single stranded
86235	Extractable nuclear antigen, antibody to, any method (e.g., nRNP, SS-A, SS-B, Sm, RNP, Sc170, J01), each antibody
06212	Es masantan

Fluorescent noninfectious agent antibody; screen, each antibody

<b>Commonwealth of Massachusetts</b>	
MassHealth	
Provider Manual Series	

Page 6-19

Independent Clinical Laboratory Manual

86480 86485

Skin test; candida

**Transmittal Letter** LAB-33

Date 01/01/09

Service	
Code	Service Description
86256	titer, each antibody
86277	Growth hormone, human (HGH), antibody
86280	Hemagglutination inhibition test (HAI)
86294	Immunoassay for tumor antigen, qualitative or semiquantitative (e.g., bladder tumor antigen)
86300	Immunoassay for tumor antigen, quantitative of semiquantitative (e.g., bladder tumor antigen)  Immunoassay for tumor antigen, quantitative; CA 15-3 (27.29)
86301	CA 19-9
86304	CA 125
86308	Heterophile antibodies; screening
86309	titer
86310	titers after absorption with beef cells and guinea pig kidney
86316	Immunoassay for tumor antigen; other antigen, quantitative (e.g., CA 50, 72-4, 549), each
86317	Immunoassay for infectious agent antibody, quantitative, not otherwise specified
86318	Immunoassay for infectious agent antibody, qualitative or semiquantitative, single step method
00310	(e.g., reagent strip)
86320	Immunoelectrophoresis; serum
86325	other fluids (e.g., urine, cerobrospinal fluid) with concentration
86327	crossed (two-dimensional assay)
86329	Immunodiffusion; not elsewhere specified
86331	gel diffusion, qualitative (Ouchterlony), each antigen or antibody
86332	Immune complex assay
86334	Immunofixation electrophoresis, serum
86335	Immunofixation electrophoresis; other fluids with concentration (e.g, urine, CSF)
86336	Inhibin A
86337	Insulin antibodies
86340	Intrinsic factor antibodies
86341	Islet cell antibody
86343	Leukocyte histamine release test (LHR)
86344	Leukocyte phagocytosis
86353	Lymphocyte transformation, mitogen (phytomitogen) or antigen-induced blastogenesis
86355	B cells, total count
86356	Mononuclear cell antigen, quantitative (e.g., flow cytometry), not otherwise specified, each antigen
86357	Natural killer (NK) cells, total count
86359	T cells; total count
86360	absolute CD4 and CD8 count, including ratio
86361	absolute CD4 count
86367	Stem cells (i.e., CD34), total count
86376	Microsomal antibodies (e.g., thyroid or liver-kidney), each
86378	Migration inhibitory factor test (MIF)
86382	Neutralization test, viral
86384	Nitroblue tetrazolium dye test (NTD)
86403	Particle agglutination; screen, each antibody
86406	titer, each antibody
86430	Rheumatoid factor; qualitative
86431	quantitative
86480	Tuberculosis test, cell mediated immunity measurement of gamma interferon antigen response
06105	Chin toot, and dida

Commonwealth of Massachusetts	
MassHealth	
Provider Manual Series	

**Page** 6-20

Independent Clinical Laboratory Manual

Transmittal Letter
LAB-33

**Date** 01/01/09

#### 601 <u>Laboratory Service Codes and Descriptions</u> (cont.)

Service

86658

86663

86664

<u>Code</u> <u>Service Description</u>

86486 unlisted antigen, each 86490 coccidioidomycosis 86510 histoplasmosis 86590 Streptokinase, antibody

Syphilis test; qualitative (e.g., VDRL, RPR, ART)

86593 quantitative

The following codes (86602-86804) are qualitative or semiquantitative immunoassays performed by multiple step methods for the detection of antibodies to infectious agents. For immunoassays by single step method (e.g., reagent strips), use code 86318. Procedures for the identification of antibodies should be coded as precisely as possible. For example, an antibody to a virus could be coded with increasing specificity for virus, family, genus, species, or type. In some cases, further precision may be added to codes by specifying the class of immunoglobulin being detected. When multiple tests are done to detect antibodies to organisms classified more precisely than the specificity allowed by available codes, it is appropriate to code each as a separate service. For example, a test for antibody to an enterovirus is coded as 86658. Coxsackie viruses are enteroviruses, but there are no codes for the individual species of enterovirus. If assays are performed for antibodies to coxsackie A and B species, each assay should be separately coded. Similarly, if multiple assays are performed for antibodies of different immunoglobulin classes, each assay should be coded separately.

86602	Antibody; actinomyces
86603	adenovirus
86606	Aspergillus
86609	bacterium, not elsewhere specified
86611	Bartonella
86612	Blastomyces
86615	Bordetella
86617	Borrelia burgdorferi (Lyme disease) confirmatory test (e.g., Western blot or immunoblot)
86618	Borrelia burgdorferi (Lyme disease)
86619	Borrelia (relapsing fever)
86622	Brucella
86625	Campylobacter
86628	Candida
86631	Chlamydia
86632	Chlamydia, IgM
86635	Coccidioides
86638	Coxiella Brunetii (Q fever)
86641	Cryptococcus
86644	cytomegalovirus (CMV)
86645	cytomegalovirus (CMV), IgM
86648	Diphtheria
86651	encephalitis, California (La Crosse)
86652	encephalitis, Eastern equine
86653	encephalitis, St. Louis
86654	encephalitis, Western equine

enterovirus (e.g., coxsackie, echo, polio)

Epstein-Barr (EB) virus, early antigen (EA) Epstein-Barr (EB) virus, nuclear antigen (EBNA)

<b>Commonwealth of Massachusetts</b>		
MassHealth		
Provider Manual Series		

**Page** 6-21

Date

Independent Clinical Laboratory Manual

Transmittal Letter
LAB-33

01/01/09

# 601 <u>Laboratory Service Codes and Descriptions</u> (cont.)

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Service Description
Service Description
Epstein-Barr (EB) virus, viral capsid (VCA)
Ehrlichia
Francisella tularensis
fungus, not elsewhere specified
Giardia lamblia
Helicobacter pylori
helminth, not elsewhere specified
Haemophilus influenza
HTLV-I
HTLV-II
HTLV or HIV antibody, confirmatory test (e.g., Western blot)
hepatitis, delta agent
herpes simplex, non-specific type test
herpes simplex, type 1
herpes simplex, type 2
histoplasma
HIV-1
HIV-2
HIV-1 and HIV-2, single assay
Hepatitis B core antibody (HBcAb); total
IgM antibody
Hepatitis B surface antibody (HBsAb)
Hepatitis Be antibody (HBeAb)
Hepatitis A antibody (HAAb); total
IgM antibody
Antibody; influenza virus
Legionella
Leishmania
Leptospira
Listeria monocytogenes
lymphocytic choriomeningitis
lymphogranuloma venereum
mucormycosis
mumps mycoplasma
Neisseria meningitidis
Nocardia
parvovirus
Plasmodium (malaria)
protozoa, not elsewhere specified
respiratory syncytial virus Rickettsia
rotavirus
rubella
rubeola
Salmonella
Shigella tetanus

86774

tetanus

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-22
Independent Clinical Laboratory Manual	Transmittal Letter  LAB-33	<b>Date</b> 01/01/09

86940

Service	Camina Description
<u>Code</u>	Service Description
86777	Toxoplasma
86778	Toxoplasma, IgM
86781	Treponema pallidum, confirmatory test (e.g., FTA-abs)
86784	trichinella
86787	varicella-zoster
86788	West Nile virus, IGM
86789	West Nile virus
86790	virus, not elsewhere specified
86793	Yersinia
86800	Thyroglobulin antibody
86803	Hepatitis C antibody
86804	confirmatory test (e.g., immunoblot)
	Tissue Typing
0.500.5	
86805	Lymphocytotoxicity assay, visual crossmatch; with titration
86806	without titration  Some concentration for systematic parameters on tibedy (PRA), standard mathed
86807 86808	Serum screening for cytotoxic percent reactive antibody (PRA); standard method quick method
86812	HLA typing; A, B, or C (e.g., A10, B7, B27), single antigen
86813	A, B, or C, multiple antigens
86816	DR/DQ, single antigen
86817	DR/DQ, snigle antigens DR/DQ, multiple antigens
86821	lymphocyte culture, mixed (MLC)
86822	lymphocyte culture, primed (PLC)
86849	Unlisted immunology procedure (I.C.)
00017	
	TRANSFUSION MEDICINE
86850	Antibody screen, RBC, each serum technique
86860	Antibody elution (RBC), each elution
86870	Antibody identification, RBC antibodies, each panel for each serum technique
86880	Antihuman globulin test (Coombs test); direct, each antiserum
86885	indirect, qualitative, each reagent red cell
86886	indirect, each antibody titer
86900	Blood typing; ABO
86901	Rh (D)
86903	antigen screening for compatible blood unit using reagent serum, per unit screened
86904	antigen screening for compatible unit using patient serum, per unit screened
86905	RBC antigens, other than ABO or Rh (D), each
86906	Rh phenotyping, complete
86920	Compatibility test each unit; immediate spin technique
86921	incubation technique
86922	antiglobulin technique
86923	electronic

Hemolysins and agglutinins; auto, screen, each

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-23
Independent Clinical Laboratory Manual	Transmittal Letter	Date
Independent Clinical Laboratory Manual	LAB-33	01/01/09

87116

Camaiaa	
Service	Somilar Description
<u>Code</u>	Service Description
86941	incubated
86970	Pretreatment of RBCs for use in RBC antibody detection, identification, and/or compatibility
	testing; incubation with chemical agents or drugs, each
86971	incubation with enzymes, each
86972	by density gradient separation
86975	Pretreatment of serum for use in RBC antibody identification; incubation with drugs, each
86976	by dilution
86977	incubation with inhibitors, each
86978	by differential redcell absorption using patient RBCs or RBCs of known phenotype, each absorption
86999	Unlisted transfusion medicine procedure (I.C.)
	MICROBIOLOGY
87001	Animal inoculation, small animal; with observation
87003	with observation and dissection
87015	Concentration (any type), for infectious agents
87040	Culture, bacterial; blood, aerobic, with isolation and presumptive identification of isolates (includes
	anaerobic culture, if appropriate)
87045	stool, aerobic, with isolation and preliminary examination (e.g., KIA, LIA), Salmonella and
	Shigella species
87046	stool, aerobic, additional pathogens, isolation and presumptive identification of isolates, each
	plate
87070	any other source except urine, blood, or stool, aerobic, with isolation and presumptive
	identification of isolates
87071	quantitative, aerobic with isolation and presumptive identification of isolates, any source except
	urine, blood, or stool
87073	quantitative, anaerobic with isolation and presumptive identification of isolates, any source
05055	except urine, blood, or stool
87075	any source, except blood, anaerobic with isolation and presumptive identification of isolates
87076	anaerobic isolate, additional methods required for definitive identification, each isolate
87077	aerobic isolate, additional methods required for definitive identification, each isolate
87081	Culture, presumptive, pathogenic organisms, screening only
87084	with colony estimation from density chart
87086 87088	Culture, bacterial; quantitative colony count, urine
87088 87101	with isolation and presumptive identification of each isolate, urine
87101	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; skin, hair, or nail
87102	other source (except blood) blood
87106	Culture, fungi, definitive identification, each organism; yeast (Use in addition to codes 87101, 87102, or 87103 when appropriate.)
87107	mold
87109	Culture, mycoplasma, any source
87110 87116	Culture, chlamydia, any source

Culture, tubercle or other acid-fast bacilli (e.g., TB, AFB, mycobacteria) any source, with isolation

and presumptive identification of isolates

<b>Commonwealth of Massachusetts</b>		
MassHealth		
Provider Manual Series		

Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-24
Transmittal Letter	Date
LAB-33	01/01/09

Independent Clinical Laboratory Manual

Service	
<u>Code</u>	Service Description
87118	Culture, mycobacterial, definitive identification, each isolate
87140	Culture, typing; immunofluorescent method, each antiserum
87143	gas-liquid chromatography (GLC) or high pressure liquid chromatography (HPLC) method
87147	immunologic method, other than immunofluorescence (e.g., agglutination grouping), per antiserum
87149	identification by nucleic acid probe
87152	identification by pulse field gel typing
87158	other methods
87164	Dark field examination, any source (e.g., penile, vaginal, oral, skin); includes specimen
	collection
87166	without collection
87168	Macroscopic examination; arthropod
87169	parasite
87172	Pinworm exam (e.g., cellophane tape prep)
87176	Homogenization, tissue, for culture
87177	Ova and parasites, direct smears, concentration and identification
87181	Susceptibility studies, antimicrobial agent; agar dilution method, per agent (e.g., antibiotic gradient
	strip)
87184	disk method, per plate (12 or fewer agents)
87185	enzyme detection (e.g., beta lactamase), per enzyme
87186	microdilution or agar dilution (minimum inhibitory concentration [MIC] or breakpoint), each
	multi-antimicrobial, per plate
87187	microdilution or agar dilution, minimum lethal concentration (MLC), each plate (List separately
	in addition to code for primary procedure.)
87188	macrobroth dilution method, each agent
87190	mycobacteria, proportion method, each agent
87197	Serum bactericidal titer (Schlicter test)
87205	Smear, primary source with interpretation; Gram or Giemsa stain for bacteria, fungi, or cell types
87206	fluorescent and/or acid-fast stain for bacteria, fungi, parasites, viruses, or cell types
87207	special stain for inclusion bodies or parasites (e.g., malaria, coccidia, microsporidia,
0=000	trypanosomes, herpes viruses)
87209	complex special stain (e.g., trichrome, iron hemotoxylin) for ova and parasites
87210	wet mount for infectious agents (e.g., saline, India ink, KOH preps)
87220	Tissue examination by KOH slide of samples from skin, hair, or nails for fungi or ectoparasite ova or mites (e.g., scabies)
87230	Toxin or antitoxin assay, tissue culture (e.g., Clostridium difficile toxin)
87250	Virus isolation; inoculation of embryonated eggs, or small animal, includes observation and
	dissection
87252	tissue culture inoculation, observation, and presumptive identification by cytopathic effect
87253	tissue culture, additional studies or definitive identification (e.g., hemabsorption, neutralization,
	immunofluorescence stain), each isolate
87254	centrifuge enhanced (shell vial) technique, includes identification with immunofluorescence stain,
	each virus
87255	including identification by non-immunologic method, other than by cytopathic effect (e.g., virus
	specific enzymatic activity)

Commonwealth of Massachusetts	
MassHealth	
Provider Manual Series	

**Page** 6-25

Date

01/01/09

Independent Clinical Laboratory Manual

Transmittal Letter

LAB-33

601 <u>Laboratory Service Codes and Descriptions</u> (cont.)

#### Service

#### <u>Code</u> <u>Service Description</u>

Infectious agents by antigen detection, immunofluorescence microscopy; or nucleic acid probe techniques should be reported as precisely as possible. The most specific code possible should be reported. If there is no specific agent code, the general methodology code (e.g., 87299, 87449, 87450, 87797, 87798, 87799, 87899) should be used. For identification of antibodies to many of the listed infectious agents, see 86602-86804.

	infectious agents, see 86602-86804.	
87260	Infectious agent antigen detection by immunofluorescent technique; adenovirus	
87265	Bordetella pertussis/parapertussis	
87267	Enterovirus, direct fluorescent antibody (DFA)	
87269	giardia	
87270	Chlamydia trachomatis	
87271	Cytomegalovirus, direct fluorescent antibody (DFA)	
87272	cryptosporidium	
87273	Herpes simplex virus type 2	
87274	Herpes simplex virus type 1	
87275	influenza B virus	
87276	influenza A virus	
87277	Legionella micdadei	
87278	Legionella pneumophila	
87279	Parainfluenza virus, each type	
87280	respiratory syncytial virus	
87281	Pneumocystis carinii	
87283	Rubeola	
87285	Treponema pallidum	
87290	Varicella zoster virus	
87299	not otherwise specified, each organism	
87300	Infectious agent antigen detection by immunofluorescent technique, polyvalent for multiple	
	organisms, each polyvalent antiserum	
87301	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative,	
	multiple step method; adenovirus enteric types 40/41	
87305	Aspergillus	
87320	Chlamydia trachomatis	
87324	Clostridium difficile toxin(s)	
87327	Cryptococcus neoformans	
87328	cryptosporidium	
87329	giardia	
87332	cytomegalovirus	
87335	Escherichia coli 0157	
87336		
87337	Entamoeba histolytica group	
87338	Helicobacter pylori, stool	
87339	Helicobacter pylori	
87340 87341	hepatitis B surface antigen (HBsAg) hepatitis B surface antigen (HBsAg) neutralization	
87350	hepatitis Be antigen (HBeAg)	
87380	hepatitis, delta agent	
07300	nepatitio, acita agent	

<b>Commonwealth of Massachusetts</b>		
MassHealth		
Provider Manual Series		

**Page** 6-26

Independent Clinical Laboratory Manual

Transmittal Letter
LAB-33

**Date** 01/01/09

Service	
Code	Service Description
couc	Service Description
87385	Histoplasma capsulatum
87390	HIV-1
87391	HIV-2
87400	influenza, A or B, each
87420	respiratory syncytial virus
87425	rotavirus
87427	Shiga-like toxin
87430	Streptococcus, group A
87449	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative; multiple step method, not otherwise specified, each organism
87450	single step method, not otherwise specified, each organism
87451	multiple step method, polyvalent for multiple organisms, each polyvalent antiserum
87470	Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana,
07470	direct probe technique
87471	Bartonella henselae and Bartonella quintana, amplified probe technique
87472	Bartonella henselae and Bartonella quintana, quantification
87475	Borrelia burgdorferi, direct probe technique
87476	Borrelia burgdorferi, amplified probe technique
87477	Borrelia burgdorferi, quantification
87480	Candida species, direct probe technique
87481	Candida species, amplified probe technique
87482	Candida species, quantification
87485	Chlamydia pneumoniae, direct probe technique
87486	Chlamydia pneumoniae, amplified probe technique
87487	Chlamydia pneumoniae, quantification
87490	Chlamydia trachomatis, direct probe technique
87491	Chlamydia trachomatis, amplified probe technique
87492	Chlamydia trachomatis, quantification
87495	cytomegalovirus, direct probe technique
87496	cytomegalovirus, amplified probe technique
87497	cytomegalovirus, quantification
87498	enterovirus, amplified probe technique
87500	vancomycin resistance (e.g., enterococcus species van A, van B), amplified probe technique
87510	Gardnerella vaginalis, direct probe technique
87511	Gardnerella vaginalis, amplified probe technique
87512	Gardnerella vaginalis, quantification
87515	hepatitis B virus, direct probe technique
87516	hepatitis B virus, amplified probe technique
87517	hepatitis B virus, quantification
87520	hepatitis C, direct probe technique
87521	hepatitis C, amplified probe technique
87522	hepatitis C, quantification
87525	hepatitis G, direct probe technique
87526	hepatitis G, amplified probe technique
87527	hepatitis G, quantification
87528	herpes simplex virus, direct probe technique
87529	herpes simplex virus, amplified probe technique
87530	herpes simplex virus, quantification

<b>Commonwealth of Massachusetts</b>			
MassHealth			
Provider Manual Series			

**Page** 6-27

Independent Clinical Laboratory Manual

87807

respiratory syncytial virus

Transmittal Letter
LAB-33

**Date** 01/01/09

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Service	
Code	Service Description
07521	
87531	herpes virus-6, direct probe technique
87532	herpes virus-6, amplified probe technique
87533	herpes virus-6, quantification
87534	HIV-1, direct probe technique
87535	HIV-1, amplified probe technique
87536	HIV-1, quantification
87537	HIV-2, direct probe technique
87538	HIV-2, amplified probe technique
87539	HIV-2, quantification
87540	Legionella pneumophila, direct probe technique
87541	Legionella pneumophila, amplified probe technique
87542	Legionella pneumophila, quantification
87550	Mycobacteria species, direct probe technique
87551	Mycobacteria species, amplified probe technique
87552	Mycobacteria species, quantification
87555	Mycobacteria tuberculosis, direct probe technique
87556	Mycobacteria tuberculosis, amplified probe technique
87557	Mycobacteria tuberculosis, quantification
87560	Mycobacteria avium-intracellulare, direct probe technique
87561	Mycobacteria avium-intracellulare, amplified probe technique
87562	Mycobacteria avium-intracellulare, quantification
87580	Mycoplasma pneumoniae, direct probe technique
87581	Mycoplasma pneumoniae, amplified probe technique
87582	Mycoplasma pneumoniae, quantification
87590	Neisseria gonorrhoeae, direct probe technique
87591	Neisseria gonorrhoeae, amplified probe technique
87592	Neisseria gonorrhoeae, quantification
87620	papillomavirus, human, direct probe technique
87621	papillomavirus, human, amplified probe technique
87622	papillomavirus, human, quantification
87640	Staphylococcus aureus, amplified probe technique
87641	Staphylococcus aureus, methicillin resistant, amplified probe technique
87650	Streptococcus, group A, direct probe technique
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
	В
87803	Clostridium difficile toxin A
87804	influenza

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-28
Independent Clinical Leberatory Manual	Transmittal Letter	Date
Independent Clinical Laboratory Manual	LAB-33	01/01/09

Service

Service	
Code	Service Description
87808	Trichomonas vaginalis
87809	adenovirus
87810	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.)
87905	Infectious agent enzymatic activity other than virus (eg, sialidase activity in vaginal fluid)
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	

Codes 88141-88155, 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

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-29
Independent Clinical Laboratory Manual	Transmittal Letter LAB-33	<b>Date</b> 01/01/09

<u></u>	·
Service	
Code	Service Description
	<del></del>
	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
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

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-30
Independent Clinical Laboratory Manual	Transmittal Letter	Date
Independent Clinical Laboratory Manual	LAB-33	01/01/09

Service Code	Service Description
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 88264	count 45 cells for mosaicism, 2 karyotypes, with banding 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
00207	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.)

# **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
	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

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-31
Independent Clinical Laboratory Manual	Transmittal Letter	Date
	LAB-33	01/01/09

89135 89136

two hours

Service	
<u>Code</u>	Service Description
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	Nerveteasing 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 (i.e., sample preparation of microscopically identified target); laser capture (I.C.)
88381	manual
88384	Array-based evaluation of multiple molecular probes; 11 through 50 probes
88385 88386	51 through 250 probes 251 through 500 probes
88399	Unlisted surgical pathology procedure (I.C.)
00377	Offisted surgical pathology procedure (i.e.)
	In Vivo (eg, Transcutaneous) Laboratory Procedures
88720	
88720 88740	Bilirubin, total, transcutaneous
88740	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin
88740 88741	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES
88740	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including
88740 88741	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report
88740 88741 89049	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including
88740 88741 89049 89050	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood
88740 88741 89049 89050 89051	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood with differential count
88740 88741 89049 89050 89051 89055	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood with differential count Leukocyte assessment, fecal, qualitative or semiqualitative Crystal identification by light microscopy with or without polarizing lens analysis, tissue or any body fluid (except urine) Duodenal intubation and aspiration; single specimen (e.g., simple bile study or afferent loop culture) plus appropriate test procedure (I.C.)
88740 88741 89049 89050 89051 89055 89060	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood with differential count Leukocyte assessment, fecal, qualitative or semiqualitative Crystal identification by light microscopy with or without polarizing lens analysis, tissue or any body fluid (except urine) Duodenal intubation and aspiration; single specimen (e.g., simple bile study or afferent loop
88740 88741 89049 89050 89051 89055 89060 89100	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood with differential count Leukocyte assessment, fecal, qualitative or semiqualitative Crystal identification by light microscopy with or without polarizing lens analysis, tissue or any body fluid (except urine) Duodenal intubation and aspiration; single specimen (e.g., simple bile study or afferent loop culture) plus appropriate test procedure (I.C.) collection of multiple fractional specimens with pancreatic or gallbladder stimulation, single or
88740 88741 89049 89050 89051 89055 89060 89100 89105	Bilirubin, total, transcutaneous Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin methemglobin  OTHER PROCEDURES  Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood with differential count Leukocyte assessment, fecal, qualitative or semiqualitative Crystal identification by light microscopy with or without polarizing lens analysis, tissue or any body fluid (except urine) Duodenal intubation and aspiration; single specimen (e.g., simple bile study or afferent loop culture) plus appropriate test procedure (I.C.) collection of multiple fractional specimens with pancreatic or gallbladder stimulation, single or double lumen tube

Gastric intubation, aspiration, and fractional collections (e.g., gastric secretory study); one hour

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-32
Independent Clinical Laboratory Manual	Transmittal Letter  LAB-33	<b>Date</b> 01/01/09

Service Code	Service Description
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	
93016	physician supervision only, without interpretation and report	
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	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original	
	waveform recording and storage, with visual superimposition scanning; includes recording,	
	scanning analysis with report, physician review and interpretation	
93225	recording (includes connection, recording, and disconnection)	
93226	scanning analysis with report	
93227	physician review and interpretation	
93228	Wearable mobile cardiovascular telemetry with electrocardiographic recording, concurrent	
	computerized real time data analysis and greater than 24 hours of accessible ECG data storage	
	(retrievable with query) with ECG triggered and patient selected events transmitted to a remote	
	attended surveillance center for up to 30 days; physician review and interpretation and report	
93229	technical support for connection andd patient instructions for use, attended surveillance, analysis	
	and physician prescribed transmission of daily and emergent data reports (I.C.)	
93230	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original	
	waveform recording and storage without superimposition scanning utilizing a device capable of	

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-33
Independent Clinical Laboratory Manual	Transmittal Letter  LAB-33	<b>Date</b> 01/01/09

Service	
Code	Service Description
93231	producing a full miniaturized printout; includes recording, microprocessor-based analysis with report, physician review and interpretation recording (includes connection, recording, and disconnection)
93231	microprocessor-based analysis with report
93232	physician review and interpretation
93235	Wearable electrocardiographic rhythm derived 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	Wearable patient activated electrocardiographic rhythm derived 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	
93732 93734	response); without reprogramming with reprogramming 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 with reprogramming Electronic analysis of single-chamber pacemaker system (includes evaluation of programmable parameters at rest and during activity where applicable, using electrocardiographic recording and
93734	response); without reprogramming with reprogramming 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 with reprogramming
93734	response); without reprogramming with reprogramming 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

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

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	<b>Page</b> 6-34
Independent Clinical Laboratory Manual	Transmittal Letter LAB-33	<b>Date</b> 01/01/09

Service

<u>Code</u> <u>Service Description</u>

#### **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.