

Local Coverage Article: Billing and Coding: MoIDX: BDX-XL2 (A56929)

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Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
Palmetto GBA	A and B MAC	10111 - MAC A	J - J	Alabama
Palmetto GBA	A and B MAC	10112 - MAC B	J - J	Alabama
Palmetto GBA	A and B MAC	10211 - MAC A	J - J	Georgia
Palmetto GBA	A and B MAC	10212 - MAC B	J - J	Georgia
Palmetto GBA	A and B MAC	10311 - MAC A	J - J	Tennessee
Palmetto GBA	A and B MAC	10312 - MAC B	J - J	Tennessee
Palmetto GBA	A and B and HHH MAC	11201 - MAC A	J - M	South Carolina
Palmetto GBA	A and B and HHH MAC	11202 - MAC B	J - M	South Carolina
Palmetto GBA	A and B and HHH MAC	11301 - MAC A	J - M	Virginia
Palmetto GBA	A and B and HHH MAC	11302 - MAC B	J - M	Virginia
Palmetto GBA	A and B and HHH MAC	11401 - MAC A	J - M	West Virginia
Palmetto GBA	A and B and HHH MAC	11402 - MAC B	J - M	West Virginia
Palmetto GBA	A and B and HHH MAC	11501 - MAC A	J - M	North Carolina
Palmetto GBA	A and B and HHH MAC	11502 - MAC B	J - M	North Carolina

Article Information

General Information

Article ID

A56929

Original Effective Date

08/22/2019

Article Title

Billing and Coding: MoIDX: BDX-XL2

Revision Effective Date

10/17/2019

Article Type

Billing and Coding

Revision Ending Date

10/21/2020

AMA CPT / ADA CDT / AHA NUBC Copyright Statement

CPT codes, descriptions and other data only are

Retirement Date

N/A

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CMS National Coverage Policy

Title XVIII of the Social Security Act, §1833(e). Prohibits Medicare payment for any claim which lacks the necessary information to process the claim.

CMS Internet-Only Manuals, Pub 100-04, Medicare Claims Processing Manual, Chapter 16, §50.5 Jurisdiction of Laboratory Claims

CMS Internet-Only Manuals, Pub 100-04, Medicare Claims Processing Manual, Chapter 23 §10 Reporting ICD Diagnosis and Procedure Codes

Article Guidance

Article Text:

The information in this article contains billing, coding or other guidelines that complement the Local Coverage Determination (LCD) for MoIDX: BDX-XL2 L37031.

To report a BDx-XL2 service, please submit the following claim information:

- Select PLA code 0080U
- Enter 1 unit of service (UOS)
- Enter the appropriate DEX Z-Code™ identifier adjacent to the CPT® code in the comment/narrative field for the following Part B claim field/types:
 - Loop 2400 or SV101-7 for the 5010A1 837P
 - Box 19 for paper claim
- Enter the appropriate DEX Z-Code™ identifier adjacent to the CPT® code in the comment/narrative field for the following Part A claim field/types:
 - Line SV202-7 for 837I electronic claim
 - Block 80 for the UB04 claim form
- Select the appropriate ICD-10-CM code

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

N/A

Group 1 Codes:

CODE	DESCRIPTION
0080U	ONCOLOGY (LUNG), MASS SPECTROMETRIC ANALYSIS OF GALECTIN-3-BINDING PROTEIN AND SCAVENGER RECEPTOR CYSTEINE-RICH TYPE 1 PROTEIN M130, WITH FIVE CLINICAL RISK FACTORS (AGE, SMOKING STATUS, NODULE DIAMETER, NODULE-SPICULATION STATUS AND NODULE LOCATION), UTILIZING PLASMA, ALGORITHM REPORTED AS A CATEGORICAL PROBABILITY OF MALIGNANCY

CPT/HCPCS Modifiers

Group 1 Paragraph:

No modifiers applicable for **ICD-10 Codes that Support Medical Necessity Group 1: Codes.**

Group 1 Codes:

N/A

Group 2 Paragraph:

N/A

Group 2 Codes:

CODE	DESCRIPTION
KX	REQUIREMENTS SPECIFIED IN THE MEDICAL POLICY HAVE BEEN MET

ICD-10 Codes that Support Medical Necessity

Group 1 Paragraph:

N/A

Group 1 Codes:

ICD-10 CODE	DESCRIPTION
R91.1	Solitary pulmonary nodule

Group 2 Paragraph:

The code R91.8 may be used when a patient has multiple lung nodules with a single nodule of concern. To indicate that R91.8 is being used for this purpose, use the KX modifier following the CPT code. The use of this modifier indicates an attestation that the patient has multiple lung nodules with a single nodule of concern for malignancy.

If the code R91.8 is being used to describe another (non-covered) diagnosis, use the appropriate modifier to indicate that the service is non-covered as not reasonable and necessary.

Group 2 Codes:

ICD-10 CODE	DESCRIPTION
R91.8	Other nonspecific abnormal finding of lung field

ICD-10 Codes that DO NOT Support Medical Necessity

N/A

Additional ICD-10 Information

N/A

Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

N/A

Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the policy, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

N/A

Other Coding Information

N/A

Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
10/17/2019	R2	This article is being revised in order to adhere to CMS requirements per chapter 13, section 13.5.1 of the Program Integrity Manual, to remove all coding from LCDs and incorporate into related Billing and Coding Articles. Regulations regarding billing and coding were removed from the CMS National Coverage Policy section of the related MoIDX: BDX-XL2 L37031 LCD and placed in this article. Under Article Text removed ICD-10 code R91.1 from the last bullet. Under CPT/HCPCS Modifiers added Group 1: Paragraph and KX under Group 2: Codes . Under ICD-10 Codes that Support Medical Necessity added Group 2: Paragraph and ICD-10 code R91.8 under Group 2: Codes .
08/22/2019	R1	All coding located in the Coding Information section has been removed from the related MoIDX: BDX-XL2 L37031 LCD and added to this article.

Associated Documents

Related Local Coverage Document(s)

LCD(s)

L37031 - MoIDX: BDX-XL2

Related National Coverage Document(s)

N/A

Statutory Requirements URL(s)

N/A

Rules and Regulations URL(s)

N/A

CMS Manual Explanations URL(s)

N/A

Other URL(s)

N/A

Public Version(s)

Updated on 10/09/2019 with effective dates 10/17/2019 - N/A

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Keywords

N/A