

Local Coverage Article: Billing and Coding: MoIDX: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR) (A56899)

Links in PDF documents are not guaranteed to work. To follow a web link, please use the MCD Website.

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

A56899

Original Effective Date

08/22/2019

Article Title

Billing and Coding: MoIDX: Genetic Testing for
Hypercoagulability / Thrombophilia (Factor V Leiden,
Factor II Prothrombin, and MTHFR)

Revision Effective Date

10/31/2019

Revision Ending Date

N/A

Article Type

Billing and Coding

Retirement Date

N/A

AMA CPT / ADA CDT / AHA NUBC Copyright Statement

CPT codes, descriptions and other data only are copyright 2019 American Medical Association. All Rights Reserved. Applicable FARS/HHSARS apply.

Current Dental Terminology © 2019 American Dental Association. All rights reserved.

Copyright © 2020, the American Hospital Association, Chicago, Illinois. Reproduced with permission. No portion of the AHA copyrighted materials contained within this publication may be copied without the express written consent of the AHA. AHA copyrighted materials including the UB-04 codes and descriptions may not be removed, copied, or utilized within any software, product, service, solution or derivative work without the written consent of the AHA. If an entity wishes to utilize any AHA materials, please contact the AHA at 312-893-6816. Making copies or utilizing the content of the UB-04 Manual, including the codes and/or descriptions, for internal purposes, resale and/or to be used in any product or publication; creating any modified or derivative work of the UB-04 Manual and/or codes and descriptions; and/or making any commercial use of UB-04 Manual or any portion thereof, including the codes and/or descriptions, is only authorized with an express license from the American Hospital Association. To license the electronic data file of UB-04 Data Specifications, contact Tim Carlson at (312) 893-6816 or Laryssa Marshall at (312) 893-6814. You may also contact us at ub04@healthforum.com.

CMS National Coverage Policy

Title XVIII of the Social Security Act, §1833(e), prohibits Medicare payment for any claim lacking the necessary documentation to process the claim.

CMS Internet-Only Manuals, Publication 100-04, Medicare Claims Processing Manual, Chapter 16, §50.5 Jurisdiction of Laboratory Claims, 60.1.2 Independent Laboratory Specimen Drawing, 60.2. Travel Allowance.

CMS Internet Online Manual Pub. 100-04 (Medicare Claims Processing Manual), Chapter 23 (Section 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: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR) (L36089).

To report a Genetic Testing for Hypercoagulability / Thrombophilia service, please submit the following claim information:

- Select appropriate CPT[®] code
- 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

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

N/A

Group 1 Codes:

| CODE | DESCRIPTION |
|-------|---|
| 81240 | F2 (PROTHROMBIN, COAGULATION FACTOR II) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, 20210G>A VARIANT |
| 81241 | F5 (COAGULATION FACTOR V) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, LEIDEN VARIANT |
| 81291 | MTHFR (5,10-METHYLENETETRAHYDROFOLATE REDUCTASE) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, COMMON VARIANTS (EG, 677T, 1298C) |

CPT/HCPCS Modifiers

N/A

ICD-10 Codes that Support Medical Necessity

N/A

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 |
|-----------------------|-------------------------|--|
| 10/31/2019 | 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: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR) L36089 LCD and placed in this article. |
| 08/22/2019 | R1 | All coding located in the Coding Information section has been removed from the |

| REVISION HISTORY DATE | REVISION HISTORY NUMBER | REVISION HISTORY EXPLANATION |
|-----------------------|-------------------------|---|
| | | related MoIDX: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR) L36089 LCD and added to this article. |

Associated Documents

Related Local Coverage Document(s)

LCD(s)

L36089 - MoIDX: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR)

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 10/21/2019 with effective dates 10/31/2019 - N/A

Updated on 08/12/2019 with effective dates 08/22/2019 - N/A

Updated on 08/12/2019 with effective dates 08/22/2019 - N/A

Keywords

N/A