

Local Coverage Article: Billing and Coding: MoIDX: Next-Generation Sequencing Lab- Developed Tests for Myeloid Malignancies and Suspected Myeloid Malignancies (A57837)

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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

A57837

Original Effective Date

02/10/2020

Article Title

Billing and Coding: MoIDX: Next-Generation Sequencing
Lab-Developed Tests for Myeloid Malignancies and
Suspected Myeloid Malignancies

Revision Effective Date

N/A

Revision Ending Date

N/A

Article Type

Billing and Coding

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 lacking the necessary documentation to process the claim.

CMS Internet-Only Manual, Pub. 100-02, Medicare Benefit Policy Manual, Chapter 15, §§80.0, 80.1.1, 80.2. Clinical Laboratory services.

CMS Internet-Only Manual, Pub. 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-Only Manual, 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: Next Generation Sequencing Lab-Developed Tests for Myeloid Malignancies and Suspected Myeloid Malignancies L38047.

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

N/A

Group 1 Codes:

| CODE | DESCRIPTION |
|-------|--|
| 81450 | TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, HEMATOLYMPHOID NEOPLASM OR DISORDER, DNA ANALYSIS, AND RNA ANALYSIS WHEN PERFORMED, 5-50 GENES (EG, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KRAS, KIT, MLL, NRAS, NPM1, NOTCH1), INTERROGATION FOR SEQUENCE VARIANTS, AND COPY NUMBER VARIANTS OR REARRANGEMENTS, OR ISOFORM EXPRESSION OR MRNA EXPRESSION LEVELS, IF PERFORMED |
| 81479 | UNLISTED MOLECULAR PATHOLOGY PROCEDURE |

CPT/HCPCS Modifiers

N/A

ICD-10 Codes that Support Medical Necessity

Group 1 Paragraph:

N/A

Group 1 Codes:

| ICD-10 CODE | DESCRIPTION |
|-------------|---|
| C92.00 | Acute myeloblastic leukemia, not having achieved remission |
| C92.01 | Acute myeloblastic leukemia, in remission |
| C92.02 | Acute myeloblastic leukemia, in relapse |
| C92.10 | Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission |
| C92.11 | Chronic myeloid leukemia, BCR/ABL-positive, in remission |

| ICD-10 CODE | DESCRIPTION |
|-------------|--|
| C92.12 | Chronic myeloid leukemia, BCR/ABL-positive, in relapse |
| C92.20 | Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission |
| C92.21 | Atypical chronic myeloid leukemia, BCR/ABL-negative, in remission |
| C92.22 | Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse |
| C92.30 | Myeloid sarcoma, not having achieved remission |
| C92.31 | Myeloid sarcoma, in remission |
| C92.32 | Myeloid sarcoma, in relapse |
| C92.40 | Acute promyelocytic leukemia, not having achieved remission |
| C92.41 | Acute promyelocytic leukemia, in remission |
| C92.42 | Acute promyelocytic leukemia, in relapse |
| C92.50 | Acute myelomonocytic leukemia, not having achieved remission |
| C92.51 | Acute myelomonocytic leukemia, in remission |
| C92.52 | Acute myelomonocytic leukemia, in relapse |
| C92.60 | Acute myeloid leukemia with 11q23-abnormality not having achieved remission |
| C92.61 | Acute myeloid leukemia with 11q23-abnormality in remission |
| C92.62 | Acute myeloid leukemia with 11q23-abnormality in relapse |
| C92.A0 | Acute myeloid leukemia with multilineage dysplasia, not having achieved remission |
| C92.A1 | Acute myeloid leukemia with multilineage dysplasia, in remission |
| C92.A2 | Acute myeloid leukemia with multilineage dysplasia, in relapse |
| C92.Z0 | Other myeloid leukemia not having achieved remission |
| C92.Z1 | Other myeloid leukemia, in remission |
| C92.Z2 | Other myeloid leukemia, in relapse |
| C92.90 | Myeloid leukemia, unspecified, not having achieved remission |
| C92.91 | Myeloid leukemia, unspecified in remission |
| C92.92 | Myeloid leukemia, unspecified in relapse |
| C93.00 | Acute monoblastic/monocytic leukemia, not having achieved remission |
| C93.01 | Acute monoblastic/monocytic leukemia, in remission |
| C93.02 | Acute monoblastic/monocytic leukemia, in relapse |
| C93.10 | Chronic myelomonocytic leukemia not having achieved remission |
| C93.12 | Chronic myelomonocytic leukemia, in relapse |
| C93.Z0 | Other monocytic leukemia, not having achieved remission |

| ICD-10 CODE | DESCRIPTION |
|-------------|---|
| C93.Z2 | Other monocytic leukemia, in relapse |
| C93.90 | Monocytic leukemia, unspecified, not having achieved remission |
| C93.92 | Monocytic leukemia, unspecified in relapse |
| C94.00 | Acute erythroid leukemia, not having achieved remission |
| C94.01 | Acute erythroid leukemia, in remission |
| C94.02 | Acute erythroid leukemia, in relapse |
| C94.21 | Acute megakaryoblastic leukemia, in remission |
| C94.40 | Acute panmyelosis with myelofibrosis not having achieved remission |
| C94.41 | Acute panmyelosis with myelofibrosis, in remission |
| C94.42 | Acute panmyelosis with myelofibrosis, in relapse |
| C94.6 | Myelodysplastic disease, not classified |
| D45 | Polycythemia vera |
| D46.0 | Refractory anemia without ring sideroblasts, so stated |
| D46.1 | Refractory anemia with ring sideroblasts |
| D46.20 | Refractory anemia with excess of blasts, unspecified |
| D46.21 | Refractory anemia with excess of blasts 1 |
| D46.22 | Refractory anemia with excess of blasts 2 |
| D46.A | Refractory cytopenia with multilineage dysplasia |
| D46.B | Refractory cytopenia with multilineage dysplasia and ring sideroblasts |
| D46.C | Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality |
| D46.4 | Refractory anemia, unspecified |
| D46.Z | Other myelodysplastic syndromes |
| D46.9 | Myelodysplastic syndrome, unspecified |
| D47.02 | Systemic mastocytosis |
| D47.1 | Chronic myeloproliferative disease |
| D47.3 | Essential (hemorrhagic) thrombocythemia |
| D47.4 | Osteomyelofibrosis |
| D47.Z9 | Other specified neoplasms of uncertain behavior of lymphoid, hematopoietic and related tissue |
| D47.9 | Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified |
| D61.09 | Other constitutional aplastic anemia |

| ICD-10 CODE | DESCRIPTION |
|-------------|--|
| D61.3 | Idiopathic aplastic anemia |
| D61.818 | Other pancytopenia |
| D61.89 | Other specified aplastic anemias and other bone marrow failure syndromes |
| D61.9 | Aplastic anemia, unspecified |
| D64.9 | Anemia, unspecified |
| D69.49 | Other primary thrombocytopenia |
| D69.59 | Other secondary thrombocytopenia |
| D69.6 | Thrombocytopenia, unspecified |
| D69.8 | Other specified hemorrhagic conditions |
| D70.4 | Cyclic neutropenia |
| D70.8 | Other neutropenia |
| D72.818 | Other decreased white blood cell count |
| D72.819 | Decreased white blood cell count, unspecified |
| D72.820 | Lymphocytosis (symptomatic) |
| D72.821 | Monocytosis (symptomatic) |
| D72.829 | Elevated white blood cell count, unspecified |
| D75.1 | Secondary polycythemia |
| D75.81 | Myelofibrosis |
| D75.89 | Other specified diseases of blood and blood-forming organs |
| D75.9 | Disease of blood and blood-forming organs, unspecified |
| Q82.2 | Congenital cutaneous mastocytosis |
| R16.1 | Splenomegaly, not elsewhere classified |
| R16.2 | Hepatomegaly with splenomegaly, not elsewhere classified |

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

N/A

Associated Documents

Related Local Coverage Document(s)

LCD(s)

DL38047 - MoIDX: Next-Generation Sequencing Lab-Developed Tests for Myeloid Malignancies and Suspected Myeloid Malignancies

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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)

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Keywords

N/A