

Local Coverage Article: MoIDX: OncoCee™ Billing and Coding Guidelines (A53112)

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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

A53112

Original Effective Date

10/01/2015

Original ICD-9 Article ID

[A53256](#)

Revision Effective Date

09/24/2018

Article Title

MoIDX: OncoCee™ Billing and Coding Guidelines

Revision Ending Date

N/A

AMA CPT / ADA CDT / AHA NUBC Copyright Statement

CPT codes, descriptions and other data only are

Retirement Date

N/A

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Article Guidance

Article Text:

The MoIDX Team has completed a preliminary review of Biocept's OncoCee, Circulating Tumor Cell (CTC) Assay to detect metastatic disease for breast, prostate, lung, and colon cancer. To date, the OncoCee assay has insufficient evidence to support reasonable and necessary criteria for Medicare reimbursement. Therefore, MoIDX will deny these CTC assay services.

To receive a CTC assay service denial, please submit the following claim information:

- Select the appropriate CPT code stack for the service rendered:
 - 86152 – Cell enumeration using immunologic selection and identification in fluid specimen (eg, CTC in blood)
 - 86153 – CTC, physician interpretation and report
- Append with GA to indicate a valid Advance Beneficiary Notice (ABN) is on file for the service
- Select the appropriate diagnosis for the patient

- Enter 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

Coding Information

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

CPT/HCPCS Codes

N/A

ICD-10 Codes that are Covered

N/A

ICD-10 Codes that are Not Covered

N/A

Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
09/24/2018	R10	Added Part A contractor numbers to this article because the LCD, L35071 - MoIDX: Circulating Tumor Cell Marker Assays, is now finalized as an A/B MAC LCD. This revision is effective 9/24/18 to correspond to the Revision Effective Date of L35071.
06/07/2018	R9	Added DEX Z-Code™ identifier information. Removed McKesson references.
06/07/2018	R8	Removed Part A billing information until associated LCD L35071 - MoIDX: Circulating Tumor Cell Marker Assays is finalized with Part A contractor numbers.
02/26/2018	R7	The Jurisdiction "J" Part B Contracts for Alabama (10112), Georgia (10212) and Tennessee (10312) are now being serviced by Palmetto GBA. The notice period for this article begins on 12/14/17 and ends on 02/25/18. Effective 02/26/18, these three contract numbers are being added to this article. No coverage, coding or other substantive changes (beyond the addition of the 3 Part B contract numbers) have been completed in this revision.
07/27/2017	R6	Removed old CPT stack code table and replaced with correct CPT codes.
07/06/2017	R5	Updated Part A and Part B Billing Guidelines. Added Part A contractor numbers to article.
11/19/2015	R4	Removed the "MoIDX ID (MID) field" and changed back to SV101-7
11/19/2015	R3	Replaced SV101-7 with MID, Removed Palmetto GBA reference and replaced with MoIDX and Removed IDs from chart
06/18/2015	R2	Completed Annual Validation.
10/01/2015	R1	Updated Article to match ICD-9 version.

Associated Documents

Related Local Coverage Document(s)

LCD(s)

L35071 - MoIDX: Circulating Tumor Cell Marker Assays

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 08/31/2018 with effective dates 09/24/2018 - N/A

Some older versions have been archived. Please visit the MCD Archive Site to retrieve them.

Keywords

N/A