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February 7, 2023

Annual Physician Notice as Required by the Office of the Inspector General

Northern Plains Laboratory, LLC, (NPL) is committed to conducting business in adherence with all applicable federal and state laws, and to comply with the program requirements of federal, state, and private health plans. In accordance with the Office of the Inspector General Compliance Program Guidance for Clinical Laboratories, published on August 4, 1998, we are providing the following information about Medicare requirements:

Medical Necessity

Physicians and other individuals authorized to order tests should only order tests that are medically necessary for the diagnosis or treatment of the patient. The Federal Office of Inspector General (OIG) takes the position that when medically unnecessary tests are ordered which result in false claims to Medicare, the physician may be subject to civil penalties under the False Claims Act. Medicare does not pay for screening tests except for certain specifically approved procedures that have frequency limits (PSA, PAPs, glucose, cholesterol, etc). Medicare also may not pay for non-FDA approved tests or those considered to be experimental. The medical necessity for tests performed must be documented in the patient's medical record. In order for NPL to bill tests to Medicare, you **must include the specific ICD-10 diagnosis code(s) for each test ordered**. NPL will not bill Medicare for tests that are not covered, are unreasonable, or unnecessary.

Advance Beneficiary Notice of Non-coverage (ABN)

If there is reason to believe that Medicare will not pay for a test, the patient (Medicare beneficiary) should be informed. The patient should sign a properly completed Advance Beneficiary Notice of Noncoverage (ABN) to indicate that he/she is responsible for the cost of the test if Medicare denies payment.

To be accepted by Medicare, the ABN must be completed by the patient before a service is provided. The ABN must include the patient's first and last name (middle initial also if on the beneficiary's Medicare card), laboratory test name(s), reason for possible denial, estimated cost, signature of patient, and the date signed. The patient must also choose one of the following options:

- Option One: "I want the **Test(s)** listed above. You may ask to be paid now, but I also want Medicare billed for an official decision on payment, which is sent to me on a Medicare Summary notice (MSN). I understand that if Medicare doesn't pay, I am responsible for Payment, but **I can appeal to Medicare** by following the directions on the MSN. If Medicare does pay, you will refund any payments I made to you, less co-pays or deductibles."

- Option Two: "I want the **Test(s)** listed above, but do not bill Medicare. You may ask to be paid now as I am responsible for payment. **I cannot appeal if Medicare is not billed.**"
- Option Three: "I DON'T WANT THE **Test(s)** listed above. I understand with this choice I am **not** responsible for payment, and **I cannot appeal to see if Medicare would pay.**"

The signed ABN notifies the Medicare beneficiary that Medicare is likely to deny payment for a specific service, the reason why, and that the patient is responsible for payment if Medicare denies payment. ABNs should not be used for every patient encounter. ABNs should be used only if you have reason to believe Medicare will deny payment based on your patient's diagnosis, or if you believe the test may exceed frequency limits (i.e. Pap, PSA, glucose, cholesterol). NPL includes an official ABN form on the backside of our requisition form and an ABN may be printed from the NPL Connect (HVR) system. NPL will not bill Medicare beneficiaries for tests performed that are denied as medically unnecessary unless an ABN has been signed by the patient.

Medicare's National Coverage Determinations (NCDs) and the Local Coverage Determinations (LCDs)

The National Coverage Determinations (NCDs) for 23 clinical lab tests went into effect November 25, 2003. The NCDs were developed via a negotiated rulemaking process that involved Medicare officials and representatives of clinical lab, physician, consumer, and hospital groups. The NCDs promote consistency and standardization of medical necessity nationwide. The Medicare Administrative Contractor (MAC) has Local Coverage Determinations (LCDs) for additional tests that are not among the NCDs. Both the NCDs and LCDs specify whether a service is reasonable and necessary, what documentation will support the need for the service, and limit coverage to specific medical diagnosis.

Attachment A contains the list of laboratory tests that have a NCD. LCDs can be found on the Noridian Medicare Part B website ([Policies - JF Part B - Noridian \(noridianmedicare.com\)](#))

Organ and Disease Oriented Panels

Organ and disease related panels will only be billed and paid by Medicare when **all** components are medically necessary and are reasonable to treat or diagnose an individual patient. The panels from the American Medical Association (AMA) 2023 Current Procedural Terminology (CPT) manual that NPL offers are the: Basic Metabolic panel, Comprehensive Metabolic panel, Electrolyte panel, Obstetric panel, Lipid panel, Renal Function panel, Acute Hepatitis panel, and Hepatic Function panel. Attachment B contains the AMA panels and individual components of each panel that NPL offers.

NPL offers some non-AMA panels not listed in the AMA 2023 CPT manual. These non-AMA panels are a set of tests developed to diagnose organ- or disease specific conditions. NPL has the following non-AMA approved panels: Neonatal Panel 8, Neonatal Panel 9 and Neonatal Panel 12. The Neonatal Panels were developed at the request of the CHI St. Alexius Health neonatologists. The most common non-AMA panels that NPL offers are outlined in Attachment C. The 2023 North Dakota Medicare Reimbursement amounts for the individual tests that comprise these non-AMA panels are included in the attachment.

Tests ordered as part of a non-AMA panel that are not part of a panel code listed in the American Medical Association (AMA) Current Procedural Terminology (CPT) code manual will be coded and billed separately.

Each individual component of either the AMA or the non-AMA panels may be ordered individually.

Medicare National Limitation Amounts

Medicare National Limitation Amounts for CPT codes are published by CMS each year. See Attachment D for the most common tests/CPT codes NPL bills Medicare. Medicaid reimbursements are equal to or less than the amount of Medicare reimbursement.

Reflex Tests

Attachment E is a list of tests performed in our laboratory that may result in "reflex" test orders. These reflex tests are consistent with regional and national standards of practice in an attempt to provide appropriate or useful information to the clinician. Our laboratory will generate an order for the appropriate additional reflex test(s). The option of ordering any one of these tests without the reflex is available. Please indicate the test without the reflex by selecting the "without reflex testing" option on the requisition form.

CPT Codes

The CPT Codes published by NPL in our electronic or hard copy handbook are provided for informational purposes only. The codes reflect our interpretation of CPT coding requirements based on AMA guidelines published annually. NPL assumes no responsibility for billing errors due to reliance on CPT codes published by NPL.

Clinical Consultants

The following Pathology Consultants, P.C. pathologists serve as NPL's clinical laboratory consultants:

Elena Rodgers-Rieger, MD	- Laboratory Medical Director - Chemistry
Jared L. Schmidt, MD	- Hematology - Coagulation - Urinalysis
Rebecca M. Ziegler, MD	- Blood Bank/Transfusion Services
Wesley A. Ellison, MD	- Microbiology - Serology

To contact a pathologist, call 701-530-6745 or 800-645-1003.

If you or your staff has other questions, please direct them to Elena Rodgers-Rieger MD, Laboratory Medical Director (530-6745) or Nancy Buchholz, Laboratory Administrative Director (530-5724).

National Coverage Determinations (NCDs)

Attachment A

CPT codes that fall under the National Coverage Determinations (NCDs) are listed below:

80061	Lipid panel
80074	Acute Hepatitis Panel
80162	Digoxin
82105	Alpha-fetoprotein (AFP); serum
82272	Blood, occult, by peroxidase activity, qualitative, feces, single specimen
82378	Carcinoembryonic antigen (CEA)
82465	Cholesterol, serum or whole blood, total
82523	Collagen cross links, any method
82728	Ferritin
82947	Glucose; quantitative, blood (except reagent strip)
82948	Glucose; blood, reagent strip
82962	Glucose, blood by glucose monitoring device(s) cleared by the FDA specifically for home use
82977	Glutamyltransferase, gamma (GGT)
82985	Glycated protein
83036	Hemoglobin; glycosylated (A1C)
83540	Iron
83550	Iron binding capacity
83700	Lipoprotein, blood; electrophoretic separation and quantitation
83701	Lipoprotein, blood; high resolution fractionation and quantitation of lipoproteins inc. lipoprotein subclasses when performed
83704	Lipoprotein, blood; quantitaion of lipoprotein particle numbers and lipoprotein particle subclasses
83718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)
83721	Lipoprotein, direct measurement; LDL cholesterol
84153	Prostate Specific Antigen (PSA); total
84436	Thyroxine; total
84439	Thyroxine; free
84443	Thyroid stimulating hormone (TSH)
84466	Transferrin
84478	Triglycerides
84479	Thyroid hormone (T3 or T4) uptake or thyroid hormone binding ratio (THBR)
84702	Gonadotropin, chorionic (hCG); quantitative
85004	Blood count; automated differential WBC count
85007	Blood count; blood smear, microscopid examination with manual differential WBC count
85008	Blood count; blood smear, microscopic examination without manual differential WBC count
85013	Blood count; spun microhematocrit
85014	Blood count; hematocrit (Hct)
85018	Blood count; hemoglobin (Hgb)
85025	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85027	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count)
85032	Blood count; manual cell count (erythrocyte, leukocyte, or platelet), each
85048	Blood count; leukocyte (WBC), automated
85049	Blood count; platelet, automated
85610	Prothrombin time
85730	Thromboplastin time, partial (PTT); plasma or whole blood
86300	Immunoassay for tumor antigen, quantitative; CA 15-3 (27.29)
86301	Immunoassay for tumor antigen, quantitative; CA 19-9
86304	Immunoassay for tumor antigen, quantitative; CA 125
86689	Antibody; HTLV or HIV antibody, confirmatory test (eg, Western Blot)
86701	Antibody; HIV-1
86702	Antibody; HIV-2
86703	Antibody; HIV-1 and HIV-2, single assay
87086	Culture, bacterial; quantitative colony count, urine
87088	Culture, bacterial; with isolation and presumptive identification of each isolate, urine
87390	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step; HIV-1
87391	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple step; HIV-2
87534	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique
87535	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe technique
87536	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification
87537	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, direct probe technique
87538	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, amplified probe technique
87539	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, quantification

AMA Panels offered at Northern Plains Laboratory

Attachment B

80048 - Basic Metabolic Panel	2023 Medicare Reimbursement	\$8.46
Sodium	Calcium	
Potassium	Creatinine	
Chloride	Glucose	
CO2	Urea Nitrogen (BUN)	
80051 - Electrolyte panel	2023 Medicare Reimbursement	\$7.01
Sodium	Chloride	
Potassium	CO2	
80053 - Comprehensive Metabolic Panel	2023 Medicare Reimbursement	\$10.56
Sodium	AST	
Potassium	Bilirubin, Total	
Chloride	Calcium	
CO2	Creatinine	
Albumin	Glucose	
Alkaline Phosphatase	Protein, Total	
ALT	Urea Nitrogen (BUN)	
80055 - Obstetric Panel	2023 Medicare Reimbursement	\$47.81
Complete Blood Count (CBC)	Hepatitis B surface antigen (HBsAg)	
Blood typing, ABO	RPR	
Blood typing, Rh	Rubella Antibody	
Antibody screen		
80061 - Lipid Panel	2023 Medicare Reimbursement	\$13.39
Cholesterol	HDL	
Triglyceride		
80069 - Renal Function Panel	2023 Medicare Reimbursement	\$8.68
Sodium	Calcium	
Potassium	Creatinine	
Chloride	Glucose	
CO2	Phosphorus	
Albumin	Urea Nitrogen (BUN)	
80074 - Acute Hepatitis Panel	2023 Medicare Reimbursement	\$47.63
Hepatitis A antibody, IgM	Hepatitis B surface antigen (HBsAg)	
Hepatitis C antibody	Hepatitis B core antibody (HBcAb), IgM	
80076 - Hepatic Function Panel	2023 Medicare Reimbursement	\$8.17
Albumin	Bilirubin, Direct	
Alkaline Phosphatase	Bilirubin, Total	
ALT (SGPT)	Protein, Total	
AST (SGOT)		
80081 - Obstetric Panel-inc. HIV testing)	2023 Medicare Reimbursement	\$74.86
Complete Blood Count (CBC)	Hepatitis B surface antigen (HBsAg)	
Blood typing, ABO	RPR	
Blood typing, Rh	Rubella Antibody	
Antibody screen	HIV-1 ag, with HIV-1 & HIV-2 ab	

Non-AMA Panels

Attachment C

Panel	Tests Included	CPT	2023 Medicare Reimbursement
ABO and RH	ABO Type RH Type	86900 86901	\$ 2.99 \$ 2.99
ABO, RH, and Antibody Screen	ABO Type RH Type Antibody Screen	86900 86901 86850	\$ 2.99 \$ 2.99 \$ 9.77
ACTH Stimulation	Cortisol, Basline and 30 Minutes Cortison, 60 Minute	80400 82533	\$ 32.62 \$ 16.30
Aldosterone/Renin Ratio	Aldosterone Renin	82088 84244	\$ 40.75 \$ 21.99
Alkaline Phosphatase Isoenzymes	Alkaline Phosphatase, total Alkaline Phosphatase, isoenzymes	84075 84080	\$ 5.18 \$ 14.78
Amylase Isoenzymes	Pancreatic Amylase Salivary Amylase	82150 82150	\$ 6.48 \$ 6.48
Antithrombin III Panel	Antithrombin III Activity Antithrombin III Antigen	85300 85301	\$ 11.85 \$ 10.81
Bartonella henselae, IgG/IgM	Bartonella henselae IgG Bartonella henselae IgM	86611 86611	\$ 10.18 \$ 10.18
Bence Jones Protein	Immunofixation, urine Protein ELP Total Protein	86335 84166 84156	\$ 29.35 \$ 17.83 \$ 3.67
Beta-2 Glycoprotein Abs, IgG/IgM	Beta-2 Glycoprotein Ab, IgG Beta-2 Glycoprotein Ab, IgM	86146 86146	\$ 25.45 \$ 25.45
Blood Culture ID by PCR	E.faecalis, E.faecium, L.monocytogenes, Staph spp, Stach aureus, Staph epi, Staph lug, Strep spp, Strep agalactiae, Strep pneumo, Strep pyrogenes, A-C-B complex, B.fragilis, Enterobacteriales, Ent.Cloacae Complex, E.coli, Kleb aerogenes, Kleb oxytoca, Kleb pneumo group, Proteus spp., Salmonella spp, S.marcescens, H.influ, N.meningitidis, Ps. Aeruginosa, Steno. maltophilia, C.albicans, C.auris, C.glabrata, C.krusei, C.parapsilosis, C. tropicalis, Cr. Neoformans/gattii	87154	\$ 218.06

This list is not inclusive; it includes a majority of panels that we perform or refer out.

Non-AMA Panels

Attachment C

Panel	Tests Included	CPT	2023 Medicare Reimbursement	
Bordetella Pertussis Ab, IgG/IgM	Bordetella pertussis Ab, IgG Bordetella pertussis Ab, IgM	86615 86615	\$ 13.19 \$ 13.19	
Borrelia Burgdorferi Ab IgG/IgM	Borrelia Burgdorferi Ab IgG Borrelia Burgdorferi Ab IgM	86617 86617	\$ 15.49 \$ 15.49	
Candida Abs, IgG/IgM/IgA	Candida Ab IgG Candida Ab IgM Candida Ab IgA	86628 86628 86628	\$ 12.01 \$ 12.01 \$ 12.01	
Carbamazapine, Free & Total	Carbamazapine, Free Carbamazapine, Total	80157 80156	\$ 13.25 \$ 14.57	
Cardiolipin Antibodies, IgG/IgM	Cardiolipin Ab IgG Cardiolipin Ab IgM	86147 86147	\$ 25.45 \$ 25.45	
Chlamydia/N Gonorrhea, Amplified	C Trachomatis N Gonorrhea	87491 87591	\$ 35.09 \$ 35.09	
CK Isoenzymes	CK Total CK Isoenzymes	82550 82552	\$ 6.51 \$ 13.39	
Cytomegalovirus (CMV) Antibodies, IgG/IgM	CMV Ab IgG CMV Ab IgM	86644 86645	\$ 14.39 \$ 16.85	
Diphtheria & Tetanus Ab, IgG	Diphtheria Ab IgG Tetanus Ab IgG	86317 86317	\$ 14.99 \$ 14.99	
Drug of Abuse Screen, Urine	Amphetamines, Barbiturates, Benzodiazepines, Cocaine, Opiates, Cannabinoids	80307	\$ 62.14	
Electrolytes, Urine	Chloride, Urine Potassium, Urine Sodium, Urine	82436 84133 84300	\$ 5.75 \$ 4.73 \$ 5.06	
Epstein Barr Virus Panel I	EBV to Early D Ag, IgG EBV to Nuclear Ag, IgG EBV to Viral Capsid Ag, IgG EBV to Viral Capsid Ag, IgM	86663 86664 86665 86665	\$ 13.12 \$ 15.29 \$ 18.14 \$ 18.14	
Epstein Barr Virus Panel II	EBV to Viral Capsid Ag, IgG EBV to Viral Capsid Ag, IgM	86665 86665	\$ 18.14 \$ 18.14	
Francisella Tularensis, IgG/IgM	Francisella Tularensis IgG Francisella Tularensis IgM	86668 86668	\$ 14.16 \$ 14.16	

This list is not inclusive; it includes a majority of panels that we perform or refer out.

Non-AMA Panels

Attachment C

Panel	Tests Included	CPT	2023 Medicare Reimbursement	
Fungal Antibody Panel by CF	Aspergillus Antibody Blastomyces Antibody Coccidioides Antibody Histoplasma Antibody, Mycelia Histoplasma Antibody, Yeast	86606 86612 86635 86698 86698	\$ 15.05 \$ 12.90 \$ 11.47 \$ 13.79 \$ 13.79	
Gastrointestinal Panel by PCR	Gastrointestinal Panel for Campylobacter, C difficile toxin A/B, Plesiomonas shigelloides, Salmonella, Yersina enterocolitica, Vibrio, Vibrio cholerae, EAEC, EPEC, ETEC, STEC, E coli 0157, EIEC, Cryptosporidium, Cyclospora cayetanensis, Entamoeba histolytica, Giardia lamblia, Adenovirus F 40/41, Astrovirus, Norovirus GI GII, Rotavirus A, Sapovirus	87507	\$ 416.78	
Gastrointestinal Viral Panel by PCR	Gastrointestinal Viral Panel for Adenovirus F 40/41, Astrovirus, Norovirus GI GII, Rotavirus A, Sapovirus	87505	\$ 128.29	
Gliadin Antibodies, IgA/IgG	Gliadin Ab IgA Gliadin Ab IgG	86258 86258	\$ 12.05 \$ 12.05	
Heavy Metals, Blood or Urine	Arsenic Lead Mercury	82175 83655 83825	\$ 18.97 \$ 12.11 \$ 16.26	
Hemoglobin/Hematocrit	Hemoglobin Hematocrit	85018 85014	\$ 2.37 \$ 2.37	
IgG Subclasses	IgG Total IgG Subclasses	82784 82787 x4	\$ 9.30 \$ 32.08	
Immunofixation with Free Light Chains, Quant, Urine	Immunofixation, urine Kappa light chains Lambda light chains Total Albumin	86335 83521 83521 84156	\$ 29.35 \$ 17.27 \$ 17.27 \$ 3.67	
Immunoglobulins, IgA, IgG and IgM, Quantitative	IgA IgG IgM	82784 82784 82784	\$ 9.30 \$ 9.30 \$ 9.30	

This list is not inclusive; it includes a majority of panels that we perform or refer out.

Non-AMA Panels

Attachment C

Panel	Tests Included	CPT	2023 Medicare Reimbursement	
Influenza, Rapid A & B	Influenza A Influenza B	87804 87804	\$ 16.55 \$ 16.55	
Iron & Iron Binding Capacity	Iron Iron Binding Capacity	83540 83550	\$ 6.47 \$ 8.74	
Iron, Iron Binding Capacity & Ferritin	Iron Ferritin Iron Binding Capacity	83540 82728 83550	\$ 6.47 \$ 13.63 \$ 8.74	
LD Isoenzymes	LD Total LD Isoenzymes	83615 83625	\$ 6.04 \$ 12.79	
Measles/Mumps/Rubella	Rubeola IgG Mump IgG Rubella IgG	86765 86735 86762	\$ 12.88 \$ 13.05 \$ 14.39	
Meningitis/Encephalitis Panel by PCR	Escherichia coli K1, Haemophilus influenzae, Listeria monocytogenes, Neisseria meningitidis, Streptococcus pneumoniae, Human parechovirus, Varicella zoster virus, Cryptococcus neoformans/gattii, Streptococcus agalactiae, CMV, Enterovirus, Human Herpes Virus 6, HSV-1, HSV-2	87483	\$ 416.78	
Microalbumin/Creatinine Ratio	Microalbumin, Urine Creatinine, Urine	82043 82570	\$ 5.78 \$ 5.18	
Monoclonal Protein Study,	Immunofixation Electrophoresis Protein, Total Protein Electrophoresis	86334 84155 84165	\$ 22.34 \$ 3.67 \$ 10.74	
Monoclonal Protein Study, Expanded Panel, Serum	Immunofixation Electrophoresis Immunoglobulin A Immunoglobulin G Immunoglobulin M Protein, Total Protein Electrophoresis Kappa light chains Lambda light chains	86334 82784 82784 82784 84155 84165 83521 83521	\$ 22.34 \$ 9.30 \$ 9.30 \$ 9.30 \$ 3.67 \$ 10.74 \$ 17.27 \$ 17.27	
Myasthenia Gravis (MG) Reflexive Panel	ACh Receptor Binding Ab Ach Receptor Blocking Ab	83519 83516	\$ 18.40 \$ 11.53	

This list is not inclusive; it includes a majority of panels that we perform or refer out.

Non-AMA Panels

Attachment C

Panel	Tests Included	CPT	2023 Medicare Reimbursement	
Parvovirus, IgG/IgM	Parvovirus IgG Parvovirus IgM	86747 86747	\$ 15.03 \$ 15.03	
Phenytoin Free & Total	Phenytoin, Total Phenytoin, Free	80185 80186	\$ 13.25 \$ 13.76	
Pneumonia Panel by PCR	Chlamydia pneumoniae Legionella pneumophila Mycoplasma pneumoniae Acinetobacter calcoaceticus-baumannii complex, Enterobacter cloacae complex, Escherichia coli, Haemophilus influenzae, Klebsiella aerogenes, Klebsiella oxytoca, Klebsiella pneumoniae group, Moraxella catarrhalis, Proteus spp, Pseudomonas aeruginosa, Serratia marcescens, Staphylococcus aureus, Streptococcus agalactiae, Streptococcus pneumoniae, Streptococcus pyogenes, Adenovirus, Coronavirus, Human Metapneumovirus, Human Rhinovirus/Enterovirus, Influenza A, Influenza B, Parainfluenza Virus, Respiratory Syncytial Virus	87486 87541 87581 87798 x15	\$ 35.09 \$ 35.09 \$ 35.09 \$ 526.35	
Poliovirus	Poliovirus Type 1 Poliovirus Type 3	86658 86658	\$ 13.03 \$ 13.03	
Protein C & S Panel, Functional	Protein C, functional Protein S, functional	85303 85306	\$ 13.84 \$ 15.32	
Protein C & S Panel, Total	Protein C, Total Protein S, Total	85302 85305	\$ 12.01 \$ 11.61	
Respiratory Panel 4-Plex, PCR	SARS CoV2 by PCR Influenza A by PCR Influenza B by PCR RSV by PCR	87637	\$ 142.63	

This list is not inclusive; it includes a majority of panels that we perform or refer out.

Non-AMA Panels

Attachment C

Panel	Tests Included	CPT	2023 Medicare Reimbursement	
Respiratory Virus Panel, PCR	Bordetella Pertussis	87798	\$	35.09
	Bordetella Parapertussis	87798	\$	35.09
	Chlamydophila Pneumoniae	87486	\$	35.09
	Mycoplasma Pneumoniae	87581	\$	35.09
	Resp Virus 12-25 targets	87633	\$	416.78
Rocky Mountain Spotted Fever, IgG/IgM	Rocky Mt Spotted Fever IgG	86757	\$	19.35
	Rocky Mt Spotted Fever IgM	86757	\$	19.35
Rubeola Antibodies, IgG/IgM	Rubeola Ab IgG	86765	\$	12.88
	Rubeola Ab IgM	86765	\$	12.88
Saccharomyces Cerevisiae Antibodies, IgA/IgG	S. Cerevisiae IgA	86671	\$	12.25
	S. Cerevisiae IgG	86671	\$	12.25
Testosterone, Total & Free	Testosterone Total	84403	\$	25.81
	Testosterone Free SHBG	84270	\$	21.73
Thyroid Antibodies	Thyroid Peroxidase (TPO) Antibody	86376	\$	14.55
	Thyroglobulin Antibody	86800	\$	15.91
Tick Borne Disease Panel by PCR	Anaplasma phagocytophilum	87468	\$	35.09
	Babesia microti	87469	\$	35.09
	Ehrlichia chaffeensis	87484	\$	35.09
	Babesia species	87798	\$	35.09
	Ehrlichia ewingii/canis	87798	\$	35.09
	Ehrlichia muris-like	87798	\$	35.09
Torch Panel, IgM	Cytomegalovirus, IgM	86645	\$	16.85
	Herpes Simplex I & II, IgM	86694	\$	14.39
	Rubella, IgM	86762	\$	14.39
	Toxoplasma, IgM	86778	\$	14.41
Toxoplasma Ab, IgG/IgM	Toxoplasma IgG	86777	\$	14.39
	Toxoplasma IgM	86778	\$	14.41
Urine Calcium/Creatinine Ratio	Calcium Urine	82340	\$	6.03
	Creatinine Urine	82570	\$	5.18
Urine Protein/Creatinine Ratio	Creatinine Urine	82570	\$	5.18
	Protein, Urine	84156	\$	3.67

This list is not inclusive; it includes a majority of panels that we perform or refer out.

Non-AMA Panels

Attachment C

Panel	Tests Included	CPT	2023 Medicare Reimbursement	
Vaginal Pathogens	Candida Gardnerella Trichomonas	87480 87510 87660	\$ 20.05	\$ 20.05
Varicella Zoster Ab, IgG/IgM	Varicella Zoster IgG Varicella Zoster IgM	86787 86787	\$ 12.88	\$ 12.88

This list is not inclusive; it includes a majority of panels that we perform or refer out.

Medicare National Limitation Amount

Attachment D

CPT	2023 Medicare I	DESCRIPTION	CPT	2023 Medicare I	DESCRIPTION
80048	\$ 8.46	Basic Metabolic Panel	81005	\$ 2.17	Myoglobin, Urine
80051	\$ 7.01	Electrolyte Panel	81015	\$ 3.05	Urine Microscopic
80053	\$ 10.56	Comprehensive Metabolic Panel	81025	\$ 8.61	Pregnancy, Urine
80055	\$ 47.81	Obstetric Panel	81050	\$ 3.64	Volume Measure
80061	\$ 13.39	Lipid Panel	81225	\$ 291.36	Cyp2c19 gene com variants
80069	\$ 8.68	Renal Function Panel	81226	\$ 450.91	Cyp2d6 gene com variants
80074	\$ 47.63	Acute Hepatitis Panel	81227	\$ 174.81	Cyp2c9 gene com variants
80076	\$ 8.17	Liver Panel	81596	\$ 72.19	Chronic Hepatitis C
80081	\$ 74.86	Obstetric Panel includes HIV testing	82010	\$ 8.17	Beta-Hydroxybutyrate
80143	\$ 18.64	Acetaminophen	82017	\$ 16.87	Acylcarnitine Quantitative Profile
80145	\$ 38.57	Adalimumab	82024	\$ 38.62	ACTH
80150	\$ 15.08	Amikacin	82040	\$ 4.95	Albumin, Serum
80151	\$ 18.64	Amiodarone	82042	\$ 7.78	Albumin, Other Source
80155	\$ 38.57	Caffeine	82043	\$ 5.78	Microalbumin
80156	\$ 14.57	Carbamazepine	82085	\$ 9.71	Aldolase
80157	\$ 13.25	Carbamazepine, Free	82088	\$ 40.75	Aldosterone
80158	\$ 18.05	Cyclosporine	82103	\$ 13.44	Alpha-1-Antitrypsin
80159	\$ 20.15	Clozapine	82104	\$ 14.46	Alpha-1-Antitrypsin Phenotype
80162	\$ 13.28	Digoxin	82105	\$ 16.77	Alpha-fetoprotein
80164	\$ 13.54	Valproic Acid	82108	\$ 25.48	Aluminum
80165	\$ 13.54	Valproic Acid Free	82131	\$ 22.98	Cystine
80167	\$ 18.64	Felbamate	82131	\$ 22.98	Phenylalanine
80168	\$ 16.34	Zarontin/Ethosuximide	82135	\$ 16.45	Aminolevulinic Acid (ALA), Urine
80169	\$ 13.73	Everolimus	82139	\$ 16.87	Amino Acid, Quantitative
80170	\$ 16.38	Gentamicin	82140	\$ 14.57	Ammonia
80171	\$ 21.67	Gabapentin/Neurontin	82150	\$ 6.48	Amylase
80173	\$ 15.78	Haloperidol	82157	\$ 29.28	Androstanedione
80175	\$ 13.25	Lamotrigine	82164	\$ 14.60	ACE
80177	\$ 13.25	Levetiracetam/Kepra	82172	\$ 21.09	Apolipoprotein
80178	\$ 6.61	Lithium	82175	\$ 18.97	Arsenic
80179	\$ 18.64	Salicylate	82180	\$ 9.89	Vitamin C
80180	\$ 18.05	Mycophenolate (mycophenolic acid)	82232	\$ 16.18	Beta-2-Microglobulin
80181	\$ 18.64	Flecanaide	82239	\$ 17.12	Bile Acids Total
80183	\$ 13.25	Oxcarbazepine	82247	\$ 5.02	Bilirubin, Total
80184	\$ 15.30	Phenobarbital	82248	\$ 5.02	Bilirubin, Direct
80185	\$ 13.25	Phenytoin/Dilantin	82261	\$ 16.87	Biotinidase
80186	\$ 13.76	Phenytoin Free	82270	\$ 4.38	Blood, Occult, qualitative;consecutive specimens
80188	\$ 16.59	Primidone	82271	\$ 5.32	Blood, Occult, other sources
80189	\$ 27.11	Itraconazole	82272	\$ 4.23	Blood, Occult, diagnostic, qual, 1-3 specimens
80195	\$ 13.73	Sirolimus	82274	\$ 15.92	Assay test for blood fecal
80197	\$ 13.73	Tacrolimus (FK506)	82300	\$ 23.64	Cadmium
80198	\$ 14.14	Theophylline	82306	\$ 29.60	Vitamin D 25
80200	\$ 16.13	Tobramycin	82308	\$ 26.79	Calcitonin
80201	\$ 11.92	Topiramate	82310	\$ 5.16	Calcium
80202	\$ 13.54	Vancomycin	82330	\$ 13.68	Calcium, Ionized
80203	\$ 13.25	Zonisamide	82340	\$ 6.03	Calcium, Urine
80204	\$ 38.57	Methotrexate	82365	\$ 12.90	Calculi Analysis
80230	\$ 38.57	Infliximab	82374	\$ 4.88	Carbon Dioxide (CO2)
80235	\$ 27.11	Lacosamide	82375	\$ 12.32	Carboxyhemoglobin
80299	\$ 18.64	Benztropine	82378	\$ 18.96	CEA
80299	\$ 18.64	Clomipramine	82379	\$ 16.87	Carnitine, Total & Free
80299	\$ 18.64	Dexamethasone	82380	\$ 9.22	Carotene
80299	\$ 18.64	Fluoxetine	82384	\$ 25.25	Catecholamines, Plasma
80299	\$ 18.64	Ibuprofen	82384	\$ 25.25	Catecholamines, Urine
80299	\$ 18.64	Ritalin	82390	\$ 10.74	Ceruloplasmin
80299	\$ 18.64	Seroquel	82397	\$ 14.12	IGF Binding Protein 3
80299	\$ 18.64	Thiothixene	82435	\$ 4.60	Chloride
80299	\$ 18.64	Trazodone	82436	\$ 5.75	Chloride, urine
80307	\$ 62.14	Alcohol	82438	\$ 5.00	Chloride, other source
80400	\$ 32.62	ACTH stimulation panel (cortisol x2)	82465	\$ 4.35	Cholesterol
81001	\$ 3.17	Urinalysis Screen & Microscopic	82480	\$ 7.87	Pseudocholinesterase, Total
81003	\$ 2.25	Ketones	82480	\$ 7.87	Cholinesterase, plasma
81003	\$ 2.25	pH Urine	82482	\$ 9.81	Cholinesterase, RBC
81003	\$ 2.25	Specific Gravity, Urine	82495	\$ 20.28	Chromium
81003	\$ 2.25	Urinalysis Screen	82507	\$ 27.80	Citric Acid

Medicare National Limitation Amount

Attachment D

CPT	2023 Medicare I DESCRIPTION	CPT	2023 Medicare I DESCRIPTION
82523 \$	18.68 C-telopeptide	83516 \$	11.53 Acetylcholine Blocking
82523 \$	18.68 N-telopeptide	83516 \$	11.53 Anti-GBM
82525 \$	12.41 Copper	83516 \$	11.53 Bullous Pemphiboid IgG Ab
82530 \$	16.71 Cortisol, Urine	83516 \$	11.53 Glutamic Acid Decarboxylase Antibody
82533 \$	16.30 Cortisol	83516 \$	11.53 Myeloperoxidase Antibody
82542 \$	24.09 PTH-related peptide	83516 \$	11.53 Parietal Cell Antibody, IgG
82550 \$	6.51 CK	83516 \$	11.53 Serine Protease 3 Antibody
82552 \$	13.39 CK Isoenzymes	83516 \$	11.53 Soluble Liver Ag Ab IgG
82553 \$	11.55 CKMB	83519 \$	18.40 21-Hydroxylase Antibody
82565 \$	5.12 Creatinine	83519 \$	18.40 Acetylcholine Binding
82570 \$	5.18 Creatinine, other source	83519 \$	18.40 AChR Ganglionic Neuronal Ab
82575 \$	9.46 Creatinine Clearance	83519 \$	18.40 Melanocyte Stimulating Hormone
82585 \$	14.14 Cryofibrinogen	83519 \$	18.40 Neuronal V-G K Channel Ab
82595 \$	6.47 Cryoglobulin	83520 \$	17.27 Alpha Subunit Pituitary Glycoprotein Hormone
82607 \$	15.08 Vitamin B12	83520 \$	17.27 Anti-Mullerian Hormone
82608 \$	14.32 Vitamin B12 Binding Capacity	83520 \$	17.27 Striated Muscle Ab
82610 \$	18.52 Cystatin C	83520 \$	17.27 Transforming Growth Factor Beta
82626 \$	25.27 DHEA	83520 \$	17.27 Tryptase
82627 \$	22.23 DHEA Sulfate	83520 \$	17.27 TSH Receptor Ab
82638 \$	12.25 Dibucaine number	83520 \$	17.27 Tumor Necrosis Factor
82652 \$	38.50 Vitamin D 1,25	83520 \$	17.27 Vascular Endothelial Growth Factor
82653 \$	22.97 Pancreatic Elastase Fecal, Quantitative	83521 \$	17.27 Kappa or Lambda Light Chains
82668 \$	44.03 Erythropoiten	83525 \$	11.43 Insulin
82670 \$	27.94 Estradiol	83529 \$	17.27 Interleukin 6
82671 \$	32.30 Estrogen	83540 \$	6.47 Iron
82677 \$	24.18 Estriol	83550 \$	8.74 TIBC
82679 \$	24.95 Estrone	83586 \$	12.80 17-Ketosteroids
82693 \$	14.90 Ethylene Glycol	83605 \$	11.57 Lactic Acid
82705 \$	5.10 Fat or lipids, feces, qualitative	83615 \$	6.04 LD
82728 \$	13.63 Ferritin	83625 \$	12.79 LD Isoenzymes
82731 \$	64.41 Fetal Fibronectin	83630 \$	19.70 Lactoferrin, Fecal, qual
82746 \$	14.70 Folate	83655 \$	12.11 Lead
82747 \$	17.65 RBC Folate	83690 \$	6.89 Lipase
82784 \$	9.30 IgA	83695 \$	14.32 Lipoprotein (a)
82784 \$	9.30 IgG	83700 \$	11.26 Lipoprotein ELP
82784 \$	9.30 IgM	83718 \$	8.19 HDL Cholesterol
82785 \$	16.46 IgE	83721 \$	10.50 LDL Direct
82787 \$	8.02 Immunoglobulin subclasses, each	83735 \$	6.70 Magnesium
82941 \$	17.63 Gastrin	83735 \$	6.70 Magnesium RBC
82943 \$	14.29 Glucagon	83785 \$	26.65 Manganese
82945 \$	3.93 Glucose, CSF	83789 \$	24.11 Iodine
82945 \$	3.93 Glucose, Other Source	83825 \$	16.26 Mercury
82947 \$	3.93 Glucose	83835 \$	16.94 Metanephrides
82950 \$	4.75 Glucose, post glucose dose	83873 \$	17.20 Myelin Basic Protein
82951 \$	12.87 Glucose, Tolerance, three specimens	83874 \$	12.92 Myoglobin
82952 \$	3.92 Glucose, Tolerance, each additional	83880 \$	39.26 B-Natriuretic Peptide
82955 \$	9.70 Glucose-6-phosphate Dehydrogenase (G6PD)	83883 \$	13.60 Retinol Binding Protein
82977 \$	7.20 GGT	83915 \$	11.15 5'Nucleotidase
82985 \$	16.76 Fructosamine	83916 \$	27.39 Oligoclonal Bands
83001 \$	18.58 FSH	83918 \$	23.60 Organic Acid, Quantitative
83002 \$	18.52 LH	83919 \$	16.45 Organic Acid, Qualitative
83003 \$	16.67 Growth Hormone	83921 \$	21.21 Methylmalonic Acid
83010 \$	12.58 Haptoglobin	83930 \$	6.61 Osmolality, Serum
83018 \$	21.96 Cobalt	83935 \$	6.82 Osmolality, Urine
83021 \$	18.06 Hemoglobin Fractionation	83937 \$	29.85 Osteocalcin
83036 \$	9.71 Hemoglokin A1C	83945 \$	14.45 Oxalate, Urine
83050 \$	8.20 Methemoglobin	83970 \$	41.28 Parathyroid Hormone, intact
83051 \$	7.31 Plasma Hemoglobin	83986 \$	3.58 pH
83070 \$	4.75 Hemosiderin	83993 \$	19.63 Calprotectin, Fecal
83090 \$	17.92 Homocystine	84066 \$	9.66 Prostatic Acid Phosphatase
83150 \$	22.41 HVA	84075 \$	5.18 Alkaline Phosphatase
83491 \$	17.90 17-OH-Corticosteroids	84080 \$	14.78 Alkaline Phosphatase Isoenzyme
83497 \$	12.90 5-HIAA	84100 \$	4.74 Phosphorus
83498 \$	27.17 17-OH-Progesterone	84105 \$	5.78 Phosphorus, urine
83505 \$	24.30 Hydroxyproline Total	84110 \$	8.44 Porphobilinogen, Urine

Medicare National Limitation Amount

Attachment D

CPT	2023 Medicare I	DESCRIPTION	CPT	2023 Medicare I	DESCRIPTION
84120	\$ 14.71	Porphyrins, Urine, Quantitative	84591	\$ 17.06	Niacin (Vitamin B3)
84132	\$ 4.76	Potassium	84597	\$ 13.72	Vitamin K
84133	\$ 4.73	Potassium, urine	84620	\$ 12.91	Xylose
84134	\$ 14.59	Prealbumin	84630	\$ 11.39	Zinc
84140	\$ 20.67	Pregnenolone	84681	\$ 20.81	C-Peptide
84144	\$ 20.86	Progesterone	84702	\$ 15.05	HCG, quantitative
84145	\$ 27.22	Procalcitonin	84702	\$ 15.05	HCG, tumor marker
84146	\$ 19.38	Prolactin	84703	\$ 7.52	HCG, qualitative
84153	\$ 18.39	Prostate Specific Antigen (PSA)	85004	\$ 6.47	Differential WBC Count, automated
84154	\$ 18.39	Prostate Specific Antigen (PSA), free	85007	\$ 3.80	Differential WBC Count, manual
84155	\$ 3.67	Protein, Total, Serum	85013	\$ 7.00	Spun Hematocrit
84156	\$ 3.67	Protein, Total, Urine	85014	\$ 2.37	Hematocrit
84157	\$ 4.00	Protein, Total, Other Source	85018	\$ 2.37	Hemoglobin
84160	\$ 5.61	Protein, Total, by Refractometry, Any Source	85025	\$ 7.77	CBC with Automated Differential
84165	\$ 10.74	Protein Electrophoresis	85027	\$ 6.47	Automated Cell Count (Hgb,Hct,RBC,WBC and platelet)
84182	\$ 29.21	CRMP-5-IgG	85044	\$ 4.31	Reticulocytes, manual
84182	\$ 29.21	Liver Cytosolic Ag Type 1	85046	\$ 5.57	Reticulocytes, automated
84202	\$ 14.35	Erythrocyte Porphyrins	85048	\$ 2.54	WBC
84202	\$ 14.35	Zinc Protoporphyrin	85049	\$ 4.48	Platelet count, automated
84206	\$ 26.69	Proinsulin	85210	\$ 12.98	Factor II, Activity
84207	\$ 28.10	Vitamin B6	85220	\$ 17.65	Factor V
84210	\$ 14.48	Pyruvic Acid	85240	\$ 17.90	Factor VII
84238	\$ 36.57	Soluble Transferrin Receptor	85245	\$ 22.94	VW factor, ristocetin cofactor
84244	\$ 21.99	Renin	85246	\$ 22.94	VW factor antigen
84252	\$ 20.24	Riboflavin (Vitamin B2)	85250	\$ 19.04	Factor IX
84255	\$ 25.53	Selenium	85260	\$ 17.90	Factor X
84260	\$ 30.98	Serotonin	85270	\$ 17.90	Factor XI
84270	\$ 21.73	Sex Hormone Binding Globulin (SHBG)	85280	\$ 19.35	Factor XII
84295	\$ 4.81	Sodium	85300	\$ 11.85	Anti-Thrombin III Enzymatic
84300	\$ 5.06	Sodium, urine	85301	\$ 10.81	Anti-Thrombin III Antigen
84302	\$ 4.86	Sodium, other source	85302	\$ 12.01	Protein C Total
84305	\$ 21.26	Insulin Growth Factor 1	85303	\$ 13.84	Protein C Functional
84311	\$ 8.10	Adenosine Deaminase Fluid	85305	\$ 11.61	Protein S Total
84311	\$ 8.10	Cholesterol, Body Fluid	85306	\$ 15.32	Protein S Functional
84311	\$ 8.10	Porphyrins, Total	85307	\$ 15.32	APC Resistance
84315	\$ 3.28	Specific Gravity, Body Fluid	85362	\$ 6.89	Fibrin Degradation Products, Semiquantitative
84402	\$ 25.47	Testosterone, Free	85379	\$ 10.18	D-Dimer
84403	\$ 25.81	Testosterone, Total	85384	\$ 9.72	Fibrinogen
84425	\$ 21.23	Thiamine (Vitamin B1)	85397	\$ 30.86	ADAMTS13 Activity
84432	\$ 16.06	Thyroglobulin	85460	\$ 7.73	Fetal Hgb; Kleihauer Betke
84433	\$ 22.17	TPMT, RBC	85461	\$ 9.36	Fetal Screen
84436	\$ 6.87	T4	85520	\$ 13.09	Heparin Assay
84439	\$ 9.02	T4 Free	85549	\$ 18.75	Lysozyme
84442	\$ 14.78	Thyroxin Binding Globulin	85576	\$ 24.91	Platelet, aggregation, each agent
84443	\$ 16.80	TSH	85610	\$ 4.29	Prothrombin Time
84445	\$ 50.86	TSI	85611	\$ 3.94	Prothrombin Time; substitution
84446	\$ 14.18	Vitamin E	85613	\$ 9.58	Lupus Anticoagulant
84450	\$ 5.18	AST	85652	\$ 2.70	Sed Rate, Automated
84460	\$ 5.30	ALT	85660	\$ 5.51	RBC Solubility
84466	\$ 12.76	Transferrin	85670	\$ 5.77	Thrombin Time
84478	\$ 5.74	Triglyceride	85730	\$ 6.01	Thromboplastin inhibition, partial (PTT)
84479	\$ 6.47	T3 Uptake	85732	\$ 6.47	Thromboplastin inhibition, partial (PTT), substitution
84480	\$ 14.18	T3 Total	85810	\$ 11.67	Viscosity
84481	\$ 16.94	T3 Free	86001	\$ 7.82	Allergen specific IgG, each allergen
84482	\$ 15.76	Reverse T3	86003	\$ 5.22	Allergen specific IgE, each allergen
84484	\$ 12.47	Troponin High Sensitivity	86005	\$ 7.97	Allergen specific IgE, jultiallergen screen
84510	\$ 10.63	Tyrosine	86008	\$ 17.93	Allergen specific IgE recombinant
84520	\$ 3.95	BUN	86015	\$ 12.05	F-actin Smooth Muscle Ab
84540	\$ 5.56	Urea, urine	86022	\$ 18.37	Antibody identification; platelet antibodies
84550	\$ 4.52	Uric Acid	86022	\$ 18.37	Heparin Associated Ab Detection
84560	\$ 5.08	Uric Acid, other source	86022	\$ 18.37	Serotonin Release Assay, Unfract Heparin
84585	\$ 15.50	VMA	86023	\$ 12.46	Platelet Antibody
84586	\$ 35.33	Vasoactive Intestinal Peptide (VIP)	86036	\$ 12.05	Neutrophil Cytoplasmic Ab
84588	\$ 33.94	Vasopressin (ADH)	86038	\$ 12.09	ANA
84590	\$ 11.61	Vitamin A	86039	\$ 11.16	ANA Titer

Medicare National Limitation Amount

Attachment D

CPT	2023 Medicare I DESCRIPTION	CPT	2023 Medicare I DESCRIPTION
86051	\$ 11.53 Aquaporin-4 Receptor Ab	86364	\$ 11.53 Tissue Transglutaminase Ab IgA
86060	\$ 7.30 ASO	86364	\$ 11.53 Tissue Transglutaminase Ab IgG
86140	\$ 5.18 C-Reactive Protein	86376	\$ 14.55 Liver Kidney Microsome-1 Ab IgG
86141	\$ 12.95 CRP, High Sensitivity	86376	\$ 14.55 Thyroid Peroxidase Ab
86146	\$ 25.45 Beta-2-Glycoprotein IgG or IgM	86381	\$ 25.45 Mitochondrial Ab
86147	\$ 25.45 Cardiolipin IgG	86431	\$ 5.67 Rheumatoid Factor
86147	\$ 25.45 Cardiolipin IgM	86480	\$ 61.98 Quantiferon Gold
86157	\$ 8.06 Cold Agglutinins	86481	\$ 100.00 Quantiferon Gold
86160	\$ 12.00 C1 Esterase Inhibitor	86592	\$ 4.27 RPR
86160	\$ 12.00 Complement C3	86592	\$ 4.27 VDRL, CSF
86160	\$ 12.00 Complement C4	86593	\$ 4.40 RPR Titer
86161	\$ 12.00 C1 Esterase Functional	86606	\$ 15.05 Aspergillus
86162	\$ 20.32 Complement (CH50)	86611	\$ 10.18 Bartonella henselae IgG
86200	\$ 12.95 Cyclic Citrullinated Peptide Ab, IgG	86611	\$ 10.18 Bartonella henselae IgM
86215	\$ 13.25 Deoxyribonuclease, Antibody	86612	\$ 12.90 Blastomyces
86225	\$ 13.74 ds DNA	86615	\$ 13.19 Bordetella
86231	\$ 12.09 Endomysial Antibodies	86618	\$ 17.03 Lyme Antibody
86235	\$ 17.93 Anti-RNP	86622	\$ 8.93 Brucella Ab
86235	\$ 17.93 Anti-Smith	86628	\$ 12.01 Candida Ab
86235	\$ 17.93 Anti-SSA	86631	\$ 11.82 Chlamydia IgG
86235	\$ 17.93 Anti-SSB	86632	\$ 12.68 Chlamydia IgM
86235	\$ 17.93 Centromere Ab	86635	\$ 11.47 Coccidioides
86235	\$ 17.93 Histone Ab	86638	\$ 12.12 Q Fever
86235	\$ 17.93 Jo-1 Ab, IgG	86644	\$ 14.39 CMV IgG
86235	\$ 17.93 Scleroderma (SCL-70)	86645	\$ 16.85 CMV IgM
86255	\$ 12.05 Anti-Striated Muscle Screen	86651	\$ 13.19 Encephalitis, California
86255	\$ 12.05 Purkinje Cell Ab	86652	\$ 13.19 Encephalitis, Eastern Equine
86255	\$ 12.05 Reticulin IgA	86653	\$ 13.19 Encephalitis, St. Louis
86256	\$ 12.05 Anti-Striated Muscle Titer	86654	\$ 13.19 Encephalitis, Western Equine
86256	\$ 12.05 dsDNA Titer	86658	\$ 13.03 Enterovirus (eg. Coxsackie, echo, polio)
86256	\$ 12.05 Endomysial Ab Titer	86663	\$ 13.12 EB EA-D Ag
86256	\$ 12.05 Purkinje Cell Ab Titer	86664	\$ 15.29 EB Nuclear Ag
86256	\$ 12.05 Reticulin IgA Titer	86665	\$ 18.14 EB CAP IgM
86256	\$ 12.05 Smooth Muscle IgG Titer	86665	\$ 18.14 EB-CAP IgG
86258	\$ 12.05 Gliadin Ab IgA	86666	\$ 10.18 Ehrlichia
86258	\$ 12.05 Gliadin Ab IgG	86668	\$ 14.16 Francisella Tularensis
86300	\$ 20.81 Cancer antigen CA Breast (15-3)	86671	\$ 12.25 S Cerevisiae Ab IgA
86300	\$ 20.81 Cancer antigen 27.29	86671	\$ 12.25 S Cerevisiae Ab IgG
86301	\$ 20.81 Cancer antigen 19-9	86674	\$ 14.72 Giardia lamblia
86304	\$ 20.81 Cancer antigen 125	86682	\$ 13.01 Toxocara Antibody IgG
86305	\$ 20.81 Human Epididymis Protein 4 (HE4)	86692	\$ 17.16 Hepatitis Delta
86308	\$ 5.18 Monotest	86694	\$ 14.39 Herpes Simplex, Non-specific Type Test
86316	\$ 20.81 Chromogranin A	86695	\$ 13.19 Herpes Simplex, Type 1
86317	\$ 14.99 Diphtheria Ab IgG	86696	\$ 19.35 Herpes Simplex, Type 2
86317	\$ 14.99 Haemophilus Influenzae B Ag, IgG	86698	\$ 13.79 Histoplasma, Mycel
86317	\$ 14.99 Streptococcus Pneumoniae Ab IgG	86698	\$ 13.79 Histoplasma, Yeast
86317	\$ 14.99 Tetanus Ab IgG	86701	\$ 8.89 HIV-1
86331	\$ 11.98 Immunodiffusion, each ag or ab	86702	\$ 13.52 HIV-2
86332	\$ 24.37 C1Q Immune Complex	86703	\$ 13.71 HIV-1/HIV-2 Antibody, 1 Result
86332	\$ 24.37 Circulating Immune Complex,C3 fragments	86704	\$ 12.05 HBC IgG/IgM
86334	\$ 22.34 Immunofixation, electrophoresis	86705	\$ 11.77 HBC IgM
86335	\$ 29.35 Beta-2-Transferrin	86706	\$ 10.74 Hepatitis Bs Antibody
86336	\$ 15.59 Inhibin A	86707	\$ 11.57 HBE Ab
86337	\$ 21.41 Insulin Antibody	86708	\$ 12.39 Hep A Total
86340	\$ 15.08 Intrinsic Factor Blocking	86709	\$ 11.26 Hep A Ab IgM
86341	\$ 23.57 Glutamic Acid Decarboxylase	86710	\$ 13.55 Influenza A IgG
86341	\$ 23.57 IA-2 Ab	86710	\$ 13.55 Influenza A IgM
86341	\$ 23.57 Islet Cell Ab	86710	\$ 13.55 Influenza B IgG
86355	\$ 37.73 B Cells, Total Count	86710	\$ 13.55 Influenza B IgM
86356	\$ 26.78 Mononuclear cell antigen, quant	86711	\$ 16.89 Stratify JC Ab
86357	\$ 37.73 Natual killer (NK) cells, Total Count	86735	\$ 13.05 Mump Antibody IgG
86359	\$ 37.73 T Cells, Total Count	86735	\$ 13.05 Mump Antibody IgM
86360	\$ 46.98 T Cells, Absolute CD4 and CD8 Count	86738	\$ 13.24 Mycoplasma IgG
86361	\$ 26.78 T Cells, Absolute CD4 Count	86738	\$ 13.24 Mycoplasma IgM

Medicare National Limitation Amount

Attachment D

CPT	2023 Medicare I	DESCRIPTION	CPT	2023 Medicare I	DESCRIPTION
86747	\$ 15.03	Parvovirus B19 IgG	87150	\$ 35.09	Culture typing by nucleic acid probe, amplified
86747	\$ 15.03	Parvovirus B19 IgM	87154	\$ 218.06	Culture typing, ID blood pathogens
86757	\$ 19.35	Rocky Mt Spotted Fever IgG	87169	\$ 4.31	Ectoparasites
86757	\$ 19.35	Rocky Mt Spotted Fever IgM	87172	\$ 4.27	Pinworm Identification
86762	\$ 14.39	Rubella IgG	87176	\$ 5.88	Homogenization, tissue, for culture
86762	\$ 14.39	Rubella IgM	87181	\$ 4.75	Susceptibility, agar dilution method
86765	\$ 12.88	Rubeola IgG	87184	\$ 7.48	Susceptibility, disk method (KB)
86765	\$ 12.88	Rubeola IgM	87186	\$ 8.65	Susceptibility, MIC
86777	\$ 14.39	Toxoplasma IgG	87205	\$ 4.27	Gram Stain
86778	\$ 14.41	Toxoplasma IgM	87207	\$ 5.99	Malaria Smears
86780	\$ 13.24	FTA-ABS	87209	\$ 17.98	Trichrome Stain
86780	\$ 13.24	TPPA	87210	\$ 5.82	Wet Prep
86784	\$ 12.56	Trichinella Ab	87220	\$ 4.27	KOH
86787	\$ 12.88	Varicella Zoster	87220	\$ 4.27	Ectoparasites, Scabies, Micro Exam Arthropod
86788	\$ 16.85	West Nile virus, IgM	87252	\$ 26.07	Culture, Viral
86789	\$ 14.39	West Nile virus	87253	\$ 20.20	Culture, Viral, Additional Studies/ID
86790	\$ 12.88	Hantavirus	87254	\$ 19.56	Culture, CMV
86790	\$ 12.88	HTLV I-II	87273	\$ 11.98	Herpes simplex virus type 2
86800	\$ 15.91	Thyroglobulin Ab	87274	\$ 11.98	Herpes simplex virus type 1
86803	\$ 14.27	Hepatitis C	87290	\$ 13.42	Varicella zoster virus
86812	\$ 25.81	HLA-B27	87305	\$ 11.98	Aspergillus Galactomannan Antigen
86880	\$ 5.39	Coombs Test, Direct	87324	\$ 11.98	C Difficile by Immunoassay
86886	\$ 5.18	Antibody Titer	87328	\$ 13.82	Cryptosporidium
86900	\$ 2.99	Blood Typing, ABO	87329	\$ 11.98	Giardia Antigen
86901	\$ 2.99	Blood Typing, Rh (D)	87338	\$ 14.38	H Pylori Ag, Feces
86905	\$ 3.83	Blood Typing, RBC antigens other than ABO or Rh	87340	\$ 10.33	Hepatitis B Surface Ag
87015	\$ 6.68	Concentration/Broth enrichment	87341	\$ 10.33	Hepatitis B Surface Ag, Confirmation
87040	\$ 10.32	Culture, Blood	87350	\$ 11.53	HBe Antigen
87045	\$ 9.44	Culture, Feces	87385	\$ 13.25	Histoplasma Antigen, Urine
87046	\$ 9.44	Culture, Campylobacter	87389	\$ 24.08	HIV-1 Ag with HIV-1 and HIV-2 antibodies
87046	\$ 9.44	Culture, Feces, Additional Pathogens, each	87425	\$ 11.98	Rotavirus Antigen
87070	\$ 8.62	Culture, Aerobic	87449	\$ 11.98	(1,3)-Beta-D-Glucan (Fungitell)
87070	\$ 8.62	Culture, CSF	87476	\$ 35.09	Lyme Disease, Amplified Probe Technique
87070	\$ 8.62	Culture, Cystic Fibrosis	87480	\$ 20.05	Candida Species, Direct Probe Technique
87070	\$ 8.62	Culture, Eye/Ear	87483	\$ 416.78	Meningitis/Encephalitis Panel by PCR
87070	\$ 8.62	Culture, Genital	87486	\$ 35.09	Chlamydophila Pneumoniae
87070	\$ 8.62	Culture, Miscellaneous	87491	\$ 35.09	Chlamydia Trachomatis Amplified Probe Technique
87070	\$ 8.62	Culture, Peritoneal Dialysate	87493	\$ 37.27	C Difficile by PCR
87070	\$ 8.62	Culture, Respiratory	87496	\$ 35.09	CMV by PCR
87070	\$ 8.62	Culture, Throat	87497	\$ 42.84	CMV DNA, Quant by PCR
87075	\$ 9.47	Culture, Anaerobic	87498	\$ 35.09	Enterovirus by PCR
87076	\$ 8.08	Anaerobic ID	87500	\$ 35.09	VRE (vanA) by PCR
87077	\$ 8.08	Aerobic ID	87502	\$ 95.80	Influenza virus, multiple types, first 2 types
87077	\$ 8.08	CLO Test	87505	\$ 128.29	Gastrointestinal Panel 3-5 targets
87081	\$ 6.63	Culture, GC	87506	\$ 262.99	Gastrointestinal Panel 6-11 targets
87081	\$ 6.63	Group B Strep Screen	87507	\$ 416.78	Gastrointestinal Panel 12-25 targets
87081	\$ 6.63	Culture, MRSA	87510	\$ 20.05	Gardnerella Vaginalis, Direct Probe Technique
87081	\$ 6.63	VRE Fecal Screen	87517	\$ 42.84	HBV Quant by PCR
87086	\$ 8.07	Culture, Urine	87522	\$ 42.84	HCV RNA Quantitative
87088	\$ 8.09	Culture, Isolation & Presumptive ID, Urine	87529	\$ 35.09	HSV by PCR
87101	\$ 7.71	Culture, Fungus Skin	87536	\$ 85.10	HIV-1, Quantification
87102	\$ 8.41	Culture, Fungus	87541	\$ 35.09	Legionella pneumophila
87103	\$ 20.46	Culture, Fungus Blood	87563	\$ 35.09	Mycoplasma genitalium
87106	\$ 10.32	Yeast ID	87581	\$ 35.09	Mycoplasma pneumoniae
87107	\$ 10.32	Mold ID	87591	\$ 35.09	N. Gonorrhoeae Amplified Probe Technique
87109	\$ 15.39	Culture, Urea/Mycoplasma	87632	\$ 218.06	Respiratory Virus, 6-11 targets
87110	\$ 19.60	Culture, Chlamydia	87633	\$ 416.78	Respiratory Virus, 12-25 targets
87116	\$ 10.80	Culture, Acid-fast Bacilli	87635	\$ 51.31	COVID-19 (SARS-CoV-2) by PCR
87140	\$ 5.57	Culture, Typing, Immunofluorescence	87637	\$ 142.63	COVID-19, Influ A, Influ B, RSV by PCR
87147	\$ 5.18	Culture, Typing, Immunologic Method	87640	\$ 35.09	MSSA by PCR
87149	\$ 20.05	Blasto ID by DNA Probe	87641	\$ 35.09	MRSA by PCR
87149	\$ 20.05	Coccidio ID by DNA Probe	87660	\$ 20.05	Trichomonas Vaginalis, Direct Probe Technique
87149	\$ 20.05	Histo ID by DNA Probe	87661	\$ 35.09	Trichomonas Vaginalis by TMA

Medicare National Limitation Amount

Attachment D

CPT	2023 Medicare I	DESCRIPTION	CPT	2023 Medicare I	DESCRIPTION
87798	\$ 35.09	Infectious agent amp probe each organism	88262	\$ 125.49	Chromosome analysis, 15-20 cells
87798	\$ 35.09	Bordetella Pertussis	88264	\$ 144.61	Chromosome analysis, 20-25 cells
87798	\$ 35.09	Epstein Barr Virus by PCR	88269	\$ 173.66	Chromosome analysis, amniotic
87798	\$ 35.09	JC Virus by PCR	88271	\$ 21.42	Molecular cytogenetics, DNA probe
87798	\$ 35.09	Norovirus by PCR	88275	\$ 51.19	Molecular cytogenetics, 100-300 cells
87798	\$ 35.09	Pneumocystis by PCR	88280	\$ 33.47	Chromosome analysis, additional karyotypes
87798	\$ 35.09	V Zoster by PCR	89051	\$ 5.60	Cell Count, BAL
87799	\$ 42.84	BK Virus by PCR, Quantitative	89051	\$ 5.60	Cell Count, CSF
87799	\$ 42.84	EBV by PCR, Quantitative	89051	\$ 5.60	Cell Count, fluid
87804	\$ 16.55	Influenzae A Rapid	89051	\$ 5.60	Cell Count, synovial
87804	\$ 16.55	Influenzae B Rapid	89060	\$ 7.33	Synovial Crystals
87807	\$ 13.10	RSV Rapid	89190	\$ 5.79	Nasal Eos Smear
87880	\$ 16.53	Strep Group A Rapid Screen			
87899	\$ 16.07	Candida Ag	36415	\$ 8.57	Venipuncture Charge
87899	\$ 16.07	Legionella Ag, Urine	G0103	\$ 19.31	PSA Screen
87899	\$ 16.07	Strep Pneumo Ag, Urine	G0480	\$ 114.43	Drug Test Definitive 1-7 Classes
87899	\$ 16.07	Shigatoxin	G0481	\$ 156.59	Drug Test Definitive 8-14 Classes
87901	\$ 257.45	HIV-1 Genotyping	G0482	\$ 198.74	Drug Test Definitive 15-21 Classes
87902	\$ 257.45	Hepatitis C Genotyping	G0483	\$ 246.92	Drug Test Definitive 22 or more Classes
88230	\$ 116.49	Tissue culture, non-neoplastic, lymphocyte			
88235	\$ 150.30	Tissue culture, non-neoplastic, amniotic			
88237	\$ 143.75	Tissue culture, neoplastic, bone marrow			

NORTHERN PLAINS LABORATORY

REFLEX TESTS

The Laboratory Model Compliance Plan published by the Federal Office of Inspector General (OIG) of the Department of Health and Human Services has changed laboratory test ordering practices. In the setting of specific pertinent tests and test results, the laboratory has historically ordered and performed selected additional tests (reflex tests) that were deemed appropriate to ensure quality patient management. These reflex tests have been consistent with regional and national standards of practice.

Whenever the following tests are ordered, NPL will reflex to the appropriate test(s) as outlined in the following chart. If you **do not want** the original test order to **reflex**, please note that on our requisition form.

ORIGINAL TEST ORDER	TEST RESULT	REFLEX TEST(S)
Antibody screen	Positive	As indicated: Antibody identification Patient antigen typing Prewarmed antibody screen Adult direct antiglobulin (Coombs) Elution studies Antibody titer
CBC	Abnormal per established criteria	Manual Differential
Clostridium Difficile Toxin by PCR	Positive	Clostridium Difficile by Immunoassay
Culture, Blood	Positive	As indicated: Blood Culture ID by PCR
Culture, pathogen identified		Susceptibility (each organism) Confirmation of resistance mechanisms (as applicable)
Culture, source dependent	Positive	Gram Stain
Culture, source dependent		Anaerobic culture in addition to aerobic culture provided appropriate transport media used
Direct Antiglobulin (Coombs) Test - Cord Blood	Positive	Elution Antibody identification Antibody screen on mother's specimen
Direct Antiglobulin (Coombs) Test - Adult	Positive Polyspecific Antiglobulin includes Monospecific Anti IgG & Anti Complement	As indicated: Elution Antibody identification
Fetal screen	Positive	Fetal cell stain (Kleihauer Betke)
GI Panel by PCR; GI Additional Panel	Detected or Equivocal Clostridium Difficile Toxin A/B	Clostridium Difficile by Immunoassay
Group B Strep by PCR	Positive Unable to determine presence or absence of GBS DNA	Susceptibility Group B Beta Streptococcus Culture
HIV Rapid	Reactive	HIV 1,2 Combo Ag/Ab by CIA with reflex

Reflex tests (continued)

ORIGINAL TEST ORDER	TEST RESULT	REFLEX TEST(S)
HPV with reflex	Positive	HPV Genotype 16 HPV Genotype 18/45
Lipid Panel	Triglyceride >400 mg/dL Triglyceride <10 mg/dL HDL <3 mg/dL HDL >200 mg/dL Cholesterol <25 mg/dL Cholesterol >2100 mg/dL Calculated LDL is a negative value	LDL, direct measurement
Lupus Anticoagulant Panel (DVVT)	Positive DVVT or prolonged aPTT	DVVT Confirm PT Mixing study (aPTT and/or PT)
MRSA by PCR	Unable to determine presence or absence of MRSA DNA	MRSA culture
MRSA/SA Skin/Soft Tissue Infection by PCR		Aerobic and/or anaerobic bacterial culture and gram stain
Platelet Count, CBC, ABC	Abnormal per established criteria	Immature Platelet Fraction (IPF)
Rapid Strep – pediatric ≤18 years	Negative	Throat Culture
Rapid Strep Plus	Negative	Throat Culture
RPR (Syphilis serology)	Reactive	TPPA RPR Titer
RPR Confirmation	Reactive Non-reactive	RPR Titer TPPA
TSH with Reflex	Abnormal result (high or low)	Free T4
Type and Crossmatch	Prior ABO/Rh not in patient history	ABO/Rh type recheck
Type and Crossmatch	Positive antibody screen	<i>As indicated:</i> Unit antigen typing Incubated and antiglobulin crossmatch Additional units crossmatched to find ordered number compatible
Urine Screen	Positive Protein, Blood, Nitrite or Leukocyte esterase	Urine Microscopic
Urine Screen with Reflex to Culture	Positive Protein, Blood, Nitrite or Leukocyte esterase Nitrite and/or Leukocyte esterase Positive	Urine Microscopic Urine Culture
Urine Screen – child <2 years from MDC or CHI St. A's	CHI St. Alexius Health and Mid Dakota Clinic registered patients only	Urine Culture
VRE by PCR	Unable to determine presence or absence of VRE DNA	VRE culture