New Reimbursement Policy- Qualitative Drug Screening

Children's Community Health Plan (CCHP) will be adopting the Centers for Medicare and Medicaid Services (CMS) guidelines for qualitative drug screens when performed in a physician's office. These changes will be effective with dates of service beginning November 1, 2014.

CPT codes 80100, 80101, and 80104 are no longer eligible for reimbursement by CCHP. Qualitative drug screen testing is eligible for reimbursement only when reported with HCPCS codes G0431 (to replace CPT codes 80100 and 80101) and/or G0434 (to replace CPT code 80104). G0431 and G0434 will have a maximum reimbursement of one unit per date of service.

Use of code G0431 is only for high complexity testing and may only be reported when tests are performed using instrumented systems. As a condition of reimbursement, CCHP may require documentation for more complex instrumented equipment usage, CLIA Certificate, or Accreditation as a high complexity lab.

More information on these guidelines can be found on the CMS Website at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1105.pdf