CODERS’ SPECIALTY GUIDE

Pathology & Laboratory
(Volume I & II)

Your essential illustrated coding guide for pathology/laboratory, including CPT®, HCPCS, tips, CPT® to ICD-10 CrossRef, CCI edits, and RVU information.

2022
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Clinical Responsibility

The provider uses a sterile sharp pointed device and pricks the site, most commonly the finger, heel, or ear lobe. He presses the pricking site to collect the blood sample. He then presses the site to stop the bleeding.

Coding Tips

This procedure is also known as a fingerstick or heelstick.

Fee Schedule

Medicare Fees National Conversion Factor: 32.4085, Facility: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00

RVU Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

RVU Non-Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

Indicators Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0.00, Global Period: XXX, Radiology Diagnostic Test: 99, Code Status: B, PC/TC Indicator: 9, Endoscopic Base Code: None, MUE: 0

Modifier Allowances 22, 33, 52, 53, 59, 63, 76, 77, 79, 99, AQ, AR, AS, CR, ET, GA, GC, GJ, GR, KX, PD, Q5, Q6, QJ, XE, XP, XS, XU

CCI Alerts (version 27.0)

36591, 36592, 96523

ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.

CCI Alerts (version 27.0)

352010, 352060, 352250, 352310, 352360, 352560, 352610, 352660, 352860

ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.
Clinical Responsibility

The lab analyst performs the technical steps to complete each of the tests the general health panel requires. The analyst may perform collection of the specimens, typically whole blood and serum, needed for this group of tests. Carefully review the code descriptor to identify the specific tests the panel includes. The code requires three components. The first two are 80053, Comprehensive metabolic panel, and 84443, Thyroid stimulating hormone, TSH. The third component is a blood count with manual or automated differential. Various tests qualify for this third component. One possibility is 85025, Blood count; complete, CBC, automated, Hgb, Hct, RBC, WBC and platelet count, and automated differential WBC count. Another possibility is a combination of 85027, Blood count; complete, CBC, automated, Hgb, Hct, RBC, WBC and platelet count, along with 85004, Blood count; automated differential WBC count. You may also see a combination of 85027 for automated complete blood count along with 85007, Blood count; blood smear, microscopic examination with manual differential WBC count. A final option for this third component is 85027 for automated complete blood count along with 85009, Blood count; manual differential WBC count, buffy coat.

The lab analyst must perform each of these three components to report the general health panel. A single component may require multiple tests. The lab analyst may use a variety of methods to perform each of the required panel tests.

Clinicians may order this panel for a comprehensive general health screening review, as results provide information related to the patient’s metabolic processes, state of the blood, and state of the thyroid.

Coding Tips

Some payers may pay separately for collecting the specimen using a code such as 36415, Collection of venous blood by venipuncture.

Clinicians rarely order the general health panel, as over the years most payers of lab tests, including Medicare, have denied payment of this panel. One reason is that its name has the connotation of being for a health screen, for which almost all payers deny payment. Consequently, when the clinician orders the three component tests as diagnostic tests, you should report the codes for the individual laboratory tests rather than the screening panel code.

To report the code for the panel, the analyst must perform every test the code definition lists. If the lab analyst performs fewer tests than the panel lists, you should report each test individually instead of using the panel code. If the lab analyst performs more tests than the panel lists, you should list the panel code plus the individual codes for the additional tests.

Fee Schedule

Medicare Fees National Conversion Factor: 32.4085, Facility: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00

RVU Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

RVU Non-Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

Indicators Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: XXX, Radiology Diagnostic Test: 99, Code Status: N, PC/TC Indicator: 9, Endoscopic Base Code: None, MUE: 0

Modifier Allowances 22, 52, 59, 79, 91, 99, AR, CR, ET, GA, GC, GR, GY, GZ, KX, Q5, Q6, QJ, QP, XE, XP, XS, XU

CCI Alerts (version 27.0) 965230

ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.

Clinical Responsibility

The lab analyst performs all technical steps to measure the sodium, potassium, chloride and carbon dioxide (CO2), in a specimen. These electrolytes are electrically charged minerals that affect important body processes such as blood acidity and muscle function. The typical specimen is serum. The lab analyst may collect the specimen in a separate procedure. Carefully review the code descriptor to identify the specific tests the panel includes. The code requires performance of all four components to report the panel: sodium 84295, potassium 84132, chloride 82435, and carbon dioxide 82374. The lab analyst may use a variety of methods to perform each of the tests on the panel.

An electrolyte panel is a set of blood tests that measures electrolyte levels to assess the general functioning of the patient’s organ systems. Clinicians may measure electrolytes in routine blood work or as a diagnostic tool when a patient presents with a variety of symptoms. The result of an electrolyte panel can help the clinician make a diagnosis or help monitor the progress of treatment.

Although not limited to testing for a specific condition, clinicians may order this test as part of routine blood work, or any time a patient presents to the emergency room or a provider’s office with symptoms that need further investigation of electrolyte results.

Coding Tips

There are several organ or disease oriented panel codes to describe commonly ordered groups of lab tests. Select the one that includes the specific tests you are reporting. The panel codes range from 80047 through 80076.

To report the code for the panel, the analyst must perform every test the code definition lists. If the lab analyst performs fewer tests than the panel lists, you should report each test individually instead of using the panel code. If the lab analyst performs more tests than the panel lists, you should list the panel code plus the individual codes for the additional tests.

Payers will cover an electrolyte panel and a separate component test such as sodium performed the same day on a different specimen if you use a modifier to indicate that you’ve performed two distinct tests.

Some payers may pay separately for collecting the specimen using a code such as 36415, Collection of venous blood by venipuncture.
Alcohol biomarkers; 1 or 2

Clinical Responsibility

The lab analyst performs a test to detect and measure the alcohol biomarker, physiological indicators of alcohol exposure or ingestion. The lab analyst may use a variety of tests to detect the biomarkers. The most common test that the lab analyst uses is an ethyl glucuronide, or EtG test. In this test, the lab analyst detects the presence of ethyl glucuronide in urine or blood samples. The lab analyst may detect it in the blood for up to 36 hours and in the urine for up to 5 days after heavy alcohol use. A positive finding of EtG in urine or blood of an individual indicates that the person recently ingested alcohol. For this code, testing may be quantitative; qualitative, showing the specimen is positive or negative for the analyte; or a combination.

The provider performs this test to monitor alcohol consumption in individuals who are legally prohibited from drinking alcohol by the justice system or restricted from drinking by their employers. Use this code when the lab analyst detects one or two alcohol biomarkers.

Coding Tips

When the lab analyst detects the presence of one or two alcohol biomarkers, use 80321, Alcohol biomarkers; 1 or 2.

Fee Schedule

Medicare Fees National Conversion Factor: 32.4085, Facility: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00

Coders’ Specialty Guide 2022: Pathology/Laboratory

Modifier Allowances

Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: XXX, Radiology Diagnostic Test: 99, Code Status: I, PC/TC Indicator: 9, Endoscopic Base Code: None, MUE: 1

CCI Alerts (version 27.0)

805001, 805021, 965230

ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.

Alcohol biomarkers; 3 or more

Clinical Responsibility

The lab analyst performs a test to detect and measure three or more alcohol biomarkers, physiological indicators of alcohol exposure or ingestion. The lab analyst may use a variety of tests to detect the biomarkers. The most common test that the lab analyst uses is an ethyl glucuronide, or EtG test. In this test, the lab analyst detects the presence of ethyl glucuronide in urine or blood samples. The lab analyst may detect it in the blood for up to 36 hours and in the urine for up to 5 days after heavy alcohol use. A positive finding of EtG in urine or blood of an individual indicates that the person recently ingested alcohol. For this code, testing may be quantitative; qualitative, showing the specimen is positive or negative for the analyte; or a combination.

The lab analyst performs this test to monitor alcohol consumption in individuals who are legally prohibited from drinking alcohol by the justice system or restricted from drinking by their employers. Use this code when the lab analyst detects 3 or more alcohol biomarkers.

Coding Tips

When the lab analyst detects the presence of three or more alcohol biomarkers, use 80322, Alcohol biomarkers; 3 or more.

Fee Schedule

Medicare Fees National Conversion Factor: 32.4085, Facility: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00

Coders’ Specialty Guide 2022: Pathology/Laboratory

Modifier Allowances

Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: XXX, Radiology Diagnostic Test: 99, Code Status: I, PC/TC Indicator: 9, Endoscopic Base Code: None, MUE: 1

CCI Alerts (version 27.0)

805001, 805021, 965230

ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.

Alkaloids, not otherwise specified

Clinical Responsibility

The lab analyst performs a measurement of opium alkaloids not otherwise specified. A typical specimen may be urine. The lab analyst may use a methodology such as chromatographic mass spectroscopy assay. This is a methodology where the analyst bombards the atoms or molecules from the sample with electrons, which he then subjects to an electric or magnetic field. The instrument can identify the resulting elements or molecules by their masses or by their characteristic
ICD-10 CrossRef
F32.0-F32.5, F32.9, F33.0-F33.3, F33.40-F33.42, F33.8, F33.9, T43.211A, T43.212A, T43.213A, T43.214A, T43.216A-T43.216S, T43.221A, T43.222A, T43.223A, T43.224A, T43.226A-T43.226S, T43.291A, T43.292A, T43.293A, T43.294A, Z02.83

80333
Antidepressants, serotonergic class; 3-5

Clinical Responsibility
The lab analyst performs a test to measure the amount of or detect the presence of three to five serotonergic antidepressants, such as mirtazapine, in a patient specimen. A typical specimen may be urine or serum. The lab analyst may use a methodology such as high performance liquid chromatography (HPLC). This method forces a combination of a pressurized liquid and the specimen through a specially designed column. This method separates the analyte, which is the substance the analyst is measuring, from the mixture, allowing a sensitive detector to quantitate the analyte. Quantitation refers to measuring the exact amount of a substance. For this code, testing may be quantitative; qualitative, showing the specimen is positive or negative for the analyte; or a combination.

Although not limited to testing for a specific condition, clinicians may order this test to help diagnose whether a patient has taken an overdose of the psychiatric medication or to determine whether a patient is complying with a prescribed regimen.

Coding Tips
Use 80333 when the lab analyst tests the specimen for three to five serotonergic antidepressants. When the provider tests for one or two, use 80332, Antidepressants, serotonergic class; one or two. When the provider tests for three to five, use 80333, Antidepressants, serotonergic class; three to five, to report.

Some payers may pay separately for collecting the specimen using a code such as 36415, Collection of venous blood by venipuncture.

Fee Schedule
Medicare Fees National Conversion Factor: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00
RUV Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00
RUV Non-Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

ICD-10 CrossRef
F32.0-F32.5, F32.9, F33.0-F33.3, F33.40-F33.42, F33.8, F33.9, T43.211A, T43.212A, T43.213A, T43.214A, T43.216A-T43.216S, T43.221A, T43.222A, T43.223A, T43.224A, T43.226A-T43.226S, T43.291A, T43.292A, T43.293A, T43.294A, Z02.83

80334
Antidepressants, serotonergic class; 6 or more

Clinical Responsibility
The lab analyst performs a test to measure the amount of or detect the presence of six or more serotonergic antidepressants, such as Mirtazapine, in a patient specimen. A typical specimen may be urine or serum. The lab analyst may use a methodology such as high performance liquid chromatography (HPLC). This method forces a combination of a pressurized liquid and the specimen through a specially designed column. This method separates the analyte, which is the substance the analyst is measuring, from the mixture, allowing a sensitive detector to quantitate the analyte. Quantitation refers to measuring the exact amount of a substance. For this code, testing may be quantitative; qualitative, showing the specimen is positive or negative for the analyte; or a combination.

Although not limited to testing for a specific condition, clinicians may order this test to help diagnose whether a patient has taken an overdose of the psychiatric medication or to determine whether a patient is complying with a prescribed regimen.

Coding Tips
Use 80334 when the lab analyst tests the specimen for six or more serotonergic antidepressants. When the provider tests for one or two, use 80332, Antidepressants, serotonergic class; one or two. When the provider tests for three to five, use 80333, Antidepressants, serotonergic class; three to five, to report.

Some payers may pay separately for collecting the specimen using a code such as 36415, Collection of venous blood by venipuncture.

Fee Schedule
Medicare Fees National Conversion Factor: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00
RUV Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00
RUV Non-Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

ICD-10 CrossRef
F32.0-F32.5, F32.9, F33.0-F33.3, F33.40-F33.42, F33.8, F33.9, T43.211A, T43.212A, T43.213A, T43.214A, T43.216A-T43.216S, T43.221A, T43.222A, T43.223A, T43.224A, T43.226A-T43.226S, T43.291A, T43.292A, T43.293A, T43.294A, Z02.83

80335
Antidepressants, tricyclic and other cycloids; 1 or 2

Although not limited to testing for a specific condition, clinicians may order this test to help diagnose whether a patient has taken an overdose of the psychiatric medication or to determine whether a patient is complying with a prescribed regimen.

Coding Tips
Use 80335 when the lab analyst tests the specimen for one or two tricyclic and other cycloids antidepressants. When the provider tests for one or two, use 80332, Antidepressants, serotonergic class; one or two. When the provider tests for three to five, use 80333, Antidepressants, serotonergic class; three to five, to report.

Some payers may pay separately for collecting the specimen using a code such as 36415, Collection of venous blood by venipuncture.

Fee Schedule
Medicare Fees National Conversion Factor: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00
RUV Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00
RUV Non-Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

CPC-4 Indicators
Modifier Allowances
0 = not allowed, 1 = allowed

CCI Alerts (version 27.0)
805001, 805021, 965230

Medicare Fees National
Conversion Factor: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00
RUV Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00
RUV Non-Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.
ICD-10 CrossRef
C73, C75.0, D34, D44.7, Z83.430, Z83.438

81439
Hereditary cardiomyopathy (eg, hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy), genomic sequence analysis panel, must include sequencing of at least 5 cardiomyopathy-related genes (eg, DSG2, MYBPC3, MYH7, PK2, TTN)

Clinical Responsibility
Using a patient specimen, such as blood, the lab analyst performs a genomic sequence analysis of at least five cardiomyopathy-related genes, possibly from the examples that the code descriptor lists. The procedure involves using specialized equipment such as a next generation gene sequencer, which is an automated instrument that determines the order of nucleotides in DNA. The instrument reports the sequence as a string of letters, called a read, which the analyst compares to a reference genome of the same genes, which is like a library of normal and variant gene sequences associated with certain conditions.

Although not limited to testing for a specific condition, clinicians may order this test to help identify any potential genetic component to cardiomyopathy, which is chronic disease of the heart muscle. The test results can aid in diagnosis, allow individualized disease management, and indicate modified surveillance and risk management for genetically susceptible individuals.

Coding Tips
Some payers may pay separately for collecting the specimen using a code such as 36415.

CPT® provides various other molecular pathology codes for tests involving most of the genes included in the 81439 test. Because 81439 includes gene sequencing of each of the genes, you should not additionally report a code for the single analysis.

Fee Schedule
Modifier Allowances 22, 52, 59, 90, 91, 92, 99, GY, GZ, KX, Q0, Q6, QJ, QP, XE, XP, XS, XU

ICD-10 CrossRef
A36.81, B33.24, G71.20, G71.21, G71.220, G71.228, G71.29, I25.5, I42.0-I42.2, I42.5, I42.6, I42.7, I43.9, O90.3

81440
Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BC515, C10or02, COQ2, COX10, DGUOK, MPV17, OPA1, PDSS2, POLG, POLG2, RPM2, SCO1, SCO2, SLC25A4, SUCLG1, SUCLG2, TAZ, TK2, and TYPM

Clinical Responsibility
Using a patient specimen, such as blood, the lab analyst performs a genomic sequence analysis panel for at least 100 genes from the nucleus that involve mitochondrial processes, including 19 specific genes that the code descriptor lists.

Mitochondria are organelles inside cells that process energy. Mitochondria have their own DNA, called mDNA, which is different from the DNA contained in the nucleus of cells throughout the body. Only the mother effectively passes mDNA to the child. However, the majority of the compounds that mitochondria need to function come from DNA found in the nucleus, not in the mitochondria itself. For this reason, clinicians may request studies involving DNA in the nucleus that impacts mitochondria, called nuclear encoded mitochondrial DNA, rather than mDNA.

The procedure involves using specialized equipment such as a next generation gene sequencer, which is an automated instrument that determines the order of nucleotides in DNA. The instrument reports the sequence as a string of letters, called a read, which the analyst compares to a reference genome of the same genes, which is like a library of normal and variant
test to help evaluate solid tissue tumors to characterize the genetic mutation involved in the disease and help the clinician determine appropriate treatment.

**Coding Tips**

CPT® provides various other molecular pathology codes for tests involving several of the genes listed as examples in the 81445 test. You should not additionally report a code for a test that evaluates a single gene, such as 81210 for BRAF, 81235 for EGFR, or 81275 for KRAS, if the 81445 panel test includes that gene.

If the lab analyst sequences S1 or more genes for solid tissue tumors, use 81455 (Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm, DNA analysis, and RNA analysis when performed, S1 or greater genes (e.g., ALK, BRAF, CDKN2A, EGF, ERBB2, KIT, KRAS, NRAS, MET, PDGFRα, PDGFRβ, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed) instead of 81445.

**Fee Schedule**

**Modifier Allowances**

22, 52, 59, 90, 91, 99, AR, CR, ET, GA, GC, GR, GY, GZ, KK, Q0, Q5, Q6, QJ, QP, XP, XS, XU

**ICD-10 CrossRef**

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.

**Clinical Responsibility**

Using a patient specimen, such as tumor tissue or cells, the lab analyst performs a genomic sequence panel for five to 50 genes to analyze DNA from tumor cells for common variants, such as several examples that the code descriptor lists, known to cause solid tissue tumors.

The procedure involves using specialized equipment such as a next generation gene sequencer, which is an automated instrument that determines the order of nucleotides in DNA. The instrument reports the sequence as a string of letters, called a read, which the analyst compares to a reference genome of the same genes, which is like a library of normal and variant gene sequences associated with certain conditions. The test also includes RNA analysis, if performed. If the lab test also evaluates any of the genes in this test for sequence variants or copy number variants, the 81445 code includes the additional evaluation.

Although not limited to testing for a specific condition, clinicians may order this panel test to help evaluate solid tissue tumors to characterize the genetic mutation involved in the disease and help the clinician determine appropriate treatment.

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Coding Tips

This test involves a spectroscope device, hand held, near infrared, and eliminates the need to draw blood. If the billing provider demonstrates medical necessity for transcutaneous hemoglobin in addition to a lab CBC, you can report both services by appending modifier 59, Distinct procedural service, to 88738.

If the provider measures transcutaneous carboxyhemoglobin see code 88740, Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin. For methemoglobin see code 88741, Hemoglobin, quantitative, transcutaneous, per day; methemoglobin.

Fee Schedule

Modifier Allowances 22, 52, 59, 79, 90, 91, GY, GZ, KK, Q6, XE, XP, XS, XU

CCI Alerts (version 27.0)

88740, 88741, 96523

ICD-10 CrossRef

88740

Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin

Clinical Responsibility

The analyst performs a quantitative, noninvasive, spectrophotometric measurement of methemoglobin using a sensor placed on the patient's fingertip that measures multiple wavelengths of light through the skin. Methemoglobin, a form of hemoglobin that carries oxygen, but is unable to release it to tissue, may occur as a congenital condition or as an acquired condition with exposure to chemicals, such as benzene, or certain antibiotics, such as chloroquine. Patients may exhibit skin discoloration, seizures, or coma.

Although not limited to testing for a specific condition, clinicians commonly order this test to immediately assess reaction to anesthesia.

Fee Schedule

Modifier Allowances 22, 52, 59, 76, 77, 79, 90, 91, 99, GA, GC, GR, GY, GZ, KK, Q6, XE, XP, XS, XU

CCI Alerts (version 27.0)

83045, 96523

ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code. Please check individual payer guidelines for specific coverage determinations.

88749

Unlisted in vivo (eg, transcutaneous) laboratory service

Clinical Responsibility

The analyst performs an in vivo laboratory service, such as a transcutaneous service through the skin, that is not represented by any of the standard and active CPT® codes available. In vivo refers to a service on a living body.

Coding Tips

CPT® guidelines instruct that you should not choose a code that merely approximates the service provided. You should report the service using only the appropriate unlisted procedure code if no such specific procedure or service code exists.

You must report a Category III code when available in place of an unlisted procedure code.

When reporting a procedure with an unlisted code, submit a cover letter explaining the reason for choosing the unlisted code instead of a defined, active code. Include one or more similar codes, and compare your service to those codes to justify the claim amount you are billing. Also include the operative notes or other relevant documentation to strengthen the claim and avoid a possible denial. Your payers will consider claims with unlisted procedure codes on a case by case basis, and they will determine payment based on the documentation you provide.

Fee Schedule

Medicare Fees National Conversion Factor: 32.4085, Facility: $0.00, Non Facility: $0.00, OPPS Facility: $0.00, OPPS Non Facility: $0.00

RVU Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

RVU Non-Facility Work RVU: 0.00, PE RVU: 0.00, Malpractice RVU: 0.00, Total RVU: 0.00

Modifier: 0 = not allowed, 1 = allowed
Clinical Responsibility

The lab analyst performs all technical steps to analyze a specimen of feces, urine, or respiratory secretions by staining for fat. The analyst places a specimen on a slide and stains the specimen, often with a Sudan stain such as Sudan III or Sudan Black IV. The analyst then views the slide under the microscope, checking for the presence of fat globules.

Clinicians may suspect patients with prolonged diarrhea of having a malabsorption syndrome. Normally the body absorbs nutrients including fat, proteins, carbohydrates, etc., through the small intestine; the colon absorbs water. Patients with rapid transit of food through the small intestine and colon will not absorb the nutrients they need, leading to many diseases. Analysts can easily find fat with a stain on the fecal specimen, which may indicate malabsorption. Urine rarely includes fat, so its presence could represent a problem with the metabolic break down of fat in the liver. Respiratory secretions, for instance sputum, do not normally contain fat, so its presence could also indicate possible liver problems and the inability to break down fat. Clinicians also sometimes test children with cystic fibrosis for the presence of fat in the respiratory secretions. Cystic fibrosis causes very thick respiratory secretions making it difficult for the patient to breath.

Although not limited to testing for a specific condition, clinicians may order this test to differentiate a sinus infection from an allergic condition. Nasal or sinus infections typically demonstrate an increase in infection fighting neutrophils while allergies, such as to seasonal pollen, or hay fever, produce greater numbers of eosinophils.

Coding Tips

For eosinophil count performed on urine or sputum specimens, use code 85999, Unlisted hematology and coagulation procedure, because no more specific code describes the procedure and specimen source.
### ICD-10 CrossRef Details

| Code   | Description                                                                 |
|--------|-----------------------------------------------------------------------------|
| A00.0  | Cholera due to Vibrio cholerae 01, biovar cholerae                          |
| A00.1  | Cholera due to Vibrio cholerae 01, biovar eltor                            |
| A00.9  | Cholera, unspecified                                                        |
| A01.00 | Typhoid fever, unspecified                                                 |
| A01.01 | Typhoid meningitis                                                         |
| A01.02 | Typhoid fever with heart involvement                                       |
| A01.03 | Typhoid pneumonia                                                          |
| A01.04 | Typhoid arthritis                                                          |
| A01.05 | Typhoid osteomyelitis                                                      |
| A01.09 | Typhoid fever with other complications                                      |
| A01.1  | Paratyphoid fever A                                                        |
| A01.2  | Paratyphoid fever B                                                        |
| A01.3  | Paratyphoid fever C                                                        |
| A01.4  | Paratyphoid fever, unspecified                                              |
| A02.0  | Salmonella enteritis                                                       |
| A02.1  | Salmonella sepsis                                                          |
| A02.20 | Localized salmonella infection, unspecified                                 |
| A02.21 | Salmonella meningitis                                                      |
| A02.22 | Salmonella pneumonia                                                       |
| A02.23 | Salmonella arthritis                                                       |
| A02.24 | Salmonella osteomyelitis                                                   |
| A02.25 | Salmonella pyelonephritis                                                  |
| A02.29 | Salmonella with other localized infection                                    |
| A02.8  | Other specified salmonella infections                                       |
| A02.9  | Salmonella infection, unspecified                                           |
| A03.0  | Shigellosis due to Shigella dysenteriae                                    |
| A03.1  | Shigellosis due to Shigella flexneri                                       |
| A03.2  | Shigellosis due to Shigella boydii                                         |
| A03.3  | Shigellosis due to Shigella sonnei                                         |
| A03.8  | Other shigellosis                                                           |
| A03.9  | Shigellosis, unspecified                                                   |
| A04.04 | Enterotoxigenic Escherichia coli infection                                  |
| A04.1  | Enteroinvasive Escherichia coli infection                                   |
| A04.3  | Enterohemorrhagic Escherichia coli infection                                |
| A04.4  | Other intestinal Escherichia coli infections                                |
| A04.5  | Campylobacter enteritis                                                    |
| A04.6  | Enteritis due to Yersinia enterocolitica                                   |
| A04.71 | Enterocolitis due to Clostridium difficile, recurrent                       |
| A04.72 | Enterocolitis due to Clostridium difficile, not specified as recurrent      |
| A04.8  | Other specified bacterial intestinal infections                              |
| A04.9  | Bacterial intestinal infection, unspecified                                 |
| A05.0  | Foodborne staphylococcal intoxication                                      |
| A05.1  | Botulism food poisoning                                                    |
| A05.2  | Foodborne Clostridium perfringens [Clostridium welchii] intoxication        |
| A05.3  | Foodborne Vibrio parahaemolyticus intoxication                            |
| A05.4  | Foodborne Bacillus cereus intoxication                                     |
| A05.5  | Foodborne Vibrio vulnificus intoxication                                   |
| A05.8  | Other specified bacterial foodborne intoxications                          |
| A05.9  | Bacterial foodborne intoxication                                           |
| A06.0  | Acute amebic dysentery                                                     |
| A06.1  | Chronic intestinal amebiasis                                                |
| A06.2  | Amebic nonsyneretic colitis                                                |
| A06.3  | Ameboma of intestine                                                       |
| A06.4  | Amebic liver abscess                                                       |
| A06.5  | Amebic lung abscess                                                       |
| A06.6  | Amebic brain abscess                                                      |
| A06.7  | Cutaneous amebiasis                                                       |
| A06.81 | Amebic cystitis                                                            |
| A06.82 | Other amebic genitourinary infections                                      |
| A06.89 | Other amebic infections                                                   |
| A06.9  | Amebiasis, unspecified                                                     |
| A07.0  | Balantidiasis                                                              |
| A07.1  | Giardiasis [lambliasis]                                                    |
| A07.2  | Cryptosporidiosis                                                          |
| A07.3  | Isosporiasis                                                               |
| A07.4  | Cyclosporiasis                                                             |
| A07.8  | Other specified protozoal intestinal diseases                               |
| A07.9  | Protozoal intestinal disease, unspecified                                   |
| A08.0  | Rotaviral enteritis                                                        |
| A08.11 | Acute gastroenteropathy due to Norwalk agent                               |
| A08.19 | Acute gastroenteropathy due to other small round viruses                   |
| A08.2  | Adenoviral enteritis                                                       |
| A08.31 | Calicivirus enteritis                                                      |
| A08.32 | Astrovirus enteritis                                                       |
| A08.39 | Other viral enteritis                                                      |
| A08.4  | Viral intestinal infection, unspecified                                     |
| A08.8  | Other specified intestinal infections                                       |
| A09.0  | Infectious gastroenteritis and colitis, unspecified                         |
| A15.0  | Tuberculosis of lung                                                       |
| A15.4  | Tuberculosis of intrathoracic lymph nodes                                   |
| A15.5  | Tuberculosis of larynx, trachea and bronchus                               |
| A15.6  | Tuberculous pleurisy                                                      |
| A15.7  | Primary respiratory tuberculosis                                           |
| A15.8  | Other respiratory tuberculosis                                             |
| A15.9  | Respiratory tuberculosis unspecified                                       |
| A17.0  | Tuberculous meningitis                                                    |
| A17.1  | Meningeal tuberculosis                                                     |
| A17.81 | Tuberculosis of brain and spinal cord                                      |
| A17.82 | Tuberculous meningonecephalitis                                            |
| A17.83 | Tuberculous neuritis                                                      |
| A17.89 | Other tuberculosis of nervous system                                       |
| A17.9  | Tuberculosis of nervous system, unspecified                                |
| A18.01 | Tuberculosis of spine                                                      |
| A18.02 | Tuberculous arthritis of other joints                                      |
| A18.03 | Tuberculosis of other bones                                                |
| A18.09 | Other musculoskeletal tuberculosis                                        |
| A18.10 | Tuberculosis of genitourinary system, unspecified                           |
| A18.11 | Tuberculosis of kidney and ureter                                          |
| A18.12 | Tuberculosis of bladder                                                    |
| A18.13 | Tuberculosis of other urinary organs                                       |
| A18.14 | Tuberculosis of prostate                                                  |
| A18.15 | Tuberculosis of other male genital organs                                  |
| A18.16 | Tuberculosis of cervix                                                     |
| A18.17 | Tuberculous female pelvic inflammatory disease                            |
| A18.18 | Tuberculosis of other female genital organs                               |
| A18.2  | Tuberculous peripheral lymphadenopathy                                     |
| A18.31 | Tuberculous peritonitis                                                   |
| A18.32 | Tuberculous enteritis                                                     |
| A18.39 | Retroperitoneal tuberculosis                                               |
| A18.4  | Tuberculosis of skin and subcutaneous tissue                              |
| A18.50 | Tuberculosis of eye, unspecified                                           |
| A18.51 | Tuberculous episcleritis                                                  |
| A18.52 | Tuberculous keratitis                                                     |
| A18.53 | Tuberculous chorioretinitis                                               |
| A18.54 | Tuberculous iridocyclitis                                                 |
| A18.59 | Other tuberculosis of eye                                                 |
| A18.6  | Tuberculosis of (inner) (middle) ear                                        |
| A18.7  | Tuberculosis of adrenal glands                                             |
| A18.81 | Tuberculosis of thyroid gland                                              |
| A18.82 | Tuberculosis of other endocrine glands                                     |
| A18.83 | Tuberculosis of digestive tract organs, not elsewhere classified           |
| A18.84 | Tuberculosis of heart                                                     |
| A18.85 | Tuberculosis of spleen                                                     |
| A18.89 | Other tuberculosis of other sites                                          |
| A19.0  | Acute miliary tuberculosis of a single specified site                       |
| A19.1  | Acute miliary tuberculosis of multiple sites                                |
| A19.2  | Acute miliary tuberculosis, unspecified                                    |
| A19.8  | Other miliary tuberculosis                                                 |
### ICD-10 Codiﬁcation

| Code | Description |
|------|-------------|
| A56.02 | Chlamydia genitalis of unknown transmission route in female, unspecified |
| A56.09 | Other chlamydial infection of lower genitourinary tract, unspecified |
| A56.11 | Chlamydia trachomatis infection of female pelvic inflammatory disease |
| A56.15 | Other chlamydia genital infection of unknown transmission route in female |
| A56.21 | Chlamydia trachomatis infection of genitourinary tract, unspecified |
| A56.22 | Chlamydia trachomatis infection of anus and rectum |
| A56.41 | Chlamydia trachomatis infection of pharynx |
| A56.81 | Sexually transmitted chlamydia infection of other sites |
| A57 | Chancroid |
| A58 | Granuloma inguinale |
| A59.00 | Urogenital trichomoniasis, unspecified |
| A59.01 | Trichomonas vaginalis infection of female genitalia, unspecified |
| A59.02 | Trichomoniasis of male genitalia, unspecified |
| A59.03 | Trichomoniasis of urogenital and extra-uterine sites, unspecified |
| A59.09 | Other urogenital trichomoniasis |
| A59.81 | Trichomoniasis of other sites |
| A59.9 | Trichomoniasis, unspecified |
| A60.00 | Herpesviral infection of urogenital system, unspecified |
| A60.01 | Herpesviral infection of penis |
| A60.02 | Herpesviral infection of other male genital organs |
| A60.03 | Herpesviral cervicitis |
| A60.04 | Herpesviral vulvovaginitis |
| A60.09 | Herpesviral infection of other urogenital tract |
| A60.1 | Herpesviral infection of perianal skin and rectum |
| A60.9 | Anogenital herpesviral infection, unspecified |
| A63.01 | Anogenital (venereal) warts |
| A63.8 | Other specified predominantly sexually transmitted diseases |
| A64 | Unspecified sexually transmitted disease |
| A65 | Herpes simplex infection of skin and subcutaneous tissue |
| A66.00 | Initial lesions of yaws |
| A66.1 | Multiple papilloma and wet crab yaws |
| A66.2 | Other skin lesions of yaws |
| A66.3 | Hyperkeratosis of yaws |
| A66.4 | Gummata and ulcers of yaws |
| A66.5 | Gangosa |
| A66.6 | Bone and joint lesions of yaws |
| A66.7 | Other manifestations of yaws |
| A66.8 | Latent yaws |
| A66.9 | Yaws, unspecified |
| A67.0 | Primary lesions of pinta |
| A67.1 | Intermediate lesions of pinta |
| A67.2 | Late lesions of pinta |
| A67.3 | Mixed lesions of pinta |
| A67.9 | Pinta, unspecified |
| A68.0 | Louse-borne relapsing fever |
| A68.1 | Tick-borne relapsing fever |
| A68.9 | Relapsing fever, unspecified |
| A69.0 | Nontuberculous ulcerative stomatitis |
| A69.1 | Other Vincent's infections of gastrointestinal tract |
| A69.20 | Lyme disease, unspecified |
| A69.21 | Menigitis due to Lyme disease |
| A69.22 | Other neurologic disorders in Lyme disease |
| A69.23 | Arthritis due to Lyme disease |
| A69.29 | Other conditions associated with Lyme disease |
| A69.8 | Other specified spirochetal infections |
| A69.9 | Spirochetal infection, unspecified |
| A70 | Chlamydia psittaci infections |
| A71.0 | Initial stage of trachoma |
| A71.1 | Active stage of trachoma |
| A71.9 | Trachoma, unspecified |
| A74.0 | Chlamydia conjunctivitis |
| A74.81 | Chlamydia peritonitis |
| A74.89 | Other chlamydial infections |
| A74.9 | Chlamydia infection, unspecified |
| A75.0 | Epidemic louse-borne typhus fever due to Rickettsia prowazekii |
| A75.1 | Recrudescent typhus (Brill's disease) |
| A75.2 | Typhus fever due to Rickettsia typhi |
| A75.3 | Typhus fever due to Rickettsia tsutsugamushi |
| A75.5 | Typhus fever, unspecified |
| A77.0 | Spotted fever due to Rickettsia rickettsii |
| A77.1 | Spotted fever due to Rickettsia conorii |
| A77.2 | Spotted fever due to Rickettsia sibirica |
| A77.3 | Spotted fever due to Rickettsia australis |
| A77.40 | Ehrlichiosis, unspecified |
| A77.41 | Ehrlichiosis chafeensis [E. chafeensis] |
| A77.49 | Other ehrlichiosis |
| A77.9 | Spotted fever, unspecified |
| A78 | Q fever |
| A79.0 | Trench fever |
| A79.1 | Rickettsialpox due to Rickettsia akari |
| A79.81 | Rickettsiosis due to Ehrlichia sennetsu |
| A79.89 | Other specified rickettsioses |
| A80.0 | Acute paralytic poliomyelitis, vaccine-associated |
| A80.1 | Acute paralytic poliomyelitis, wild virus, indigenous |
| A80.2 | Acute paralytic poliomyelitis, unspecified |
| A80.30 | Acute paralytic poliomyelitis, unspecified |
| A80.39 | Other acute paralytic poliomyelitis |
| A80.4 | Acute nonparalytic poliomyelitis |
| A80.9 | Acute poliomyelitis, unspecified |
| A81.00 | Creutzfeldt-Jakob disease, unspecified |
| A81.01 | Variant Creutzfeldt-Jakob disease |
| A81.09 | Other Creutzfeldt-Jakob disease |
| A81.1 | Subacute sclerosing panencephalitis |
| A81.12 | Progressive multifocal leukoencephalopathy |
| A81.15 | Gerstmann-Straussler-Scheinker syndrome |
| A81.83 | Fatal familial insomnia |
| A81.89 | Other atypical viruses of central nervous system |
| A81.9 | Atypical virus infections of central nervous system, unspecified |
| A82.0 | Sylvatic rabies |
| A82.1 | Urban rabies |
| A82.9 | Rabies, unspecified |
| A83.0 | Japanese encephalitis |
| A83.1 | Western equine encephalitis |
| A83.2 | Eastern equine encephalitis |
| A83.3 | St Louis encephalitis |
| A83.4 | Australian encephalitis |
| A83.5 | California encephalitis |
| A83.6 | Rocio virus disease |
| A83.8 | Other mosquito-borne viral encephalitis |
| A83.9 | Mosquito-borne viral encephalitis, unspecified |
| A84.0 | Far Eastern tick-borne encephalitis [Russian spring-summer encephalitis] |
| A84.1 | Central European tick-borne encephalitis |
| A84.9 | Tick-borne viral encephalitis, unspecified |
| A85.0 | Enteroviral encephalitis |
| A85.1 | Adenoviral encephalitis |
| A85.2 | Arthropod-borne viral encephalitis, unspecified |
| A85.8 | Other specified viral encephalitis |
| A86 | Unspecified viral encephalitis |
| A87.0 | Enteroviral meningitis |
| A87.1 | Adenoviral meningitis |
| A87.2 | Lymphocytic choriomeningitis |
| A87.8 | Other viral meningitis |
| A87.9 | Viral meningitis, unspecified |
| A88.0 | Enteroviral exanthematosus fever [Boston exanthem] |
| A88.8 | Other specified viral infections of central nervous system |
| A89 | Unspecified viral infection of central nervous system |
| A90 | Dengue fever [classical dengue] |
| A91 | Dengue hemorrhagic fever |
| A92.0 | Chikungunya virus disease |
| A92.1 | O'nyong-nyong fever |
| A92.2 | Venezuelan equine fever |
| A92.30 | West Nile virus infection, unspecified |
| A92.31 | West Nile virus infection with encephalitis |
| A92.32 | West Nile virus infection with other neurologic manifestation |
| A92.39 | West Nile virus infection with other complications |
| A92.4 | Rift Valley fever |
| A92.5 | Zika virus disease |
| A92.8 | Other specified mosquito-borne viral fevers |
## Modifier Descriptors

| Modifier | Description |
|----------|-------------|
| **CPT® Modifiers** | |
| 22 | Increased Procedural Services |
| 23 | Unusual Anesthesia |
| 24 | Unrelated Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional During a Postoperative Period |
| 25 | Significant, Separately Identifiable Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional on the Same Day of the Procedure or Other Service |
| 26 | Professional Component |
| 27 | Multiple Outpatient Hospital E/M Encounters on the Same Date |
| 32 | Mandated Services |
| 33 | Preventive Services |
| 47 | Anesthesia by Surgeon |
| 50 | Bilateral Procedure |
| 51 | Multiple Procedures |
| 52 | Reduced Services |
| 53 | Discontinued Procedure |
| 54 | Surgical Care Only |
| 55 | Postoperative Management Only |
| 56 | Preoperative Management Only |
| 57 | Decision for Surgery |
| 58 | Staged or Related Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period |
| 59 | Distinct Procedural Service |
| 62 | Two Surgeons |
| 63 | Procedure Performed on Infants less than 4 kg |
| 66 | Surgical Team |
| 73 | Discontinued Out-Patient Hospital/Ambulatory Surgery Center (ASC) Procedure Prior to the Administration of Anesthesia |
| 74 | Discontinued Out-Patient Hospital/Ambulatory Surgery Center (ASC) Procedure After Administration of Anesthesia |
| 76 | Repeat Procedure or Service by Same Physician or Other Qualified Health Care Professional |
| 77 | Repeat Procedure by Another Physician or Other Qualified Health Care Professional |
| 78 | Unplanned Return to the Operating/Procedure Room by the Same Physician or Other Qualified Health Care Professional Following Initial Procedure for a Related Procedure During the Postoperative Period |
| **Modifier** | **Description** |
| 79 | Unrelated Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period |
| 80 | Assistant Surgeon |
| 81 | Minimum Assistant Surgeon |
| 82 | Assistant Surgeon (when qualified resident surgeon not available) |
| 90 | Reference (Outside) Laboratory |
| 91 | Repeat Clinical Diagnostic Laboratory Test |
| 92 | Alternative Laboratory Platform Testing |
| 95 | Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System |
| 96 | Habilitative Services |
| 97 | Rehabilitative Services |
| 99 | Multiple Modifiers |

### Category II Modifiers

| Modifier | Description |
|----------|-------------|
| 1P | Performance Measure Exclusion Modifier due to Medical Reasons |
| 2P | Performance Measure Exclusion Modifier due to Patient Reasons |
| 3P | Performance Measure Exclusion Modifier due to System Reasons |
| 8P | Performance Measure Reporting Modifier - Action Not Performed, Reason Not Otherwise Specified |

### HCPCS Level II Modifiers

| Modifier | Description |
|----------|-------------|
| A1 | Dressing for one wound |
| A2 | Dressing for two wounds |
| A3 | Dressing for three wounds |
| A4 | Dressing for four wounds |
| A5 | Dressing for five wounds |
| A6 | Dressing for six wounds |
| A7 | Dressing for seven wounds |
| A8 | Dressing for eight wounds |
| A9 | Dressing for nine or more wounds |
| AA | Anesthesia services performed personally by anesthesiologist |
| AD | Medical supervision by a physician: more than four concurrent anesthesia procedures |
| AE | Registered dietician |
| AF | Specialty physician |
| AG | Primary physician |
| AH | Clinical psychologist |
| AI | Principal physician of record |
| Modifier | Description |
|----------|-------------|
| GS       | Dosage of erythropoietin stimulating agent has been reduced and maintained in response to hematocrit or hemoglobin level |
| GT       | Via interactive audio and video telecommunication systems |
| GU       | Waiver of liability statement issued as required by payer policy, routine notice |
| GV       | Attending physician not employed or paid under arrangement by the patient’s hospice provider |
| GW       | Service not related to the hospice patient’s terminal condition |
| GX       | Notice of liability issued, voluntary under payer policy |
| GY       | Item or service statutorily excluded, does not meet the definition of any Medicare benefit or, for Non-Medicare insurers, is not a contract benefit |
| GZ       | Item or service expected to be denied as not reasonable and necessary |
| H9       | Court-ordered |
| HA       | Child/adolescent program |
| HB       | Adult program, non-geriatric |
| HC       | Adult program, geriatric |
| HD       | Pregnant/parenting women’s program |
| HE       | Mental health program |
| HF       | Substance abuse program |
| HG       | Opioid addiction treatment program |
| HH       | Integrated mental health/substance abuse program |
| HI       | Integrated mental health and intellectual disability/developmental disabilities program |
| HJ       | Employee assistance program |
| HK       | Specialized mental health programs for high-risk populations |
| HL       | Intern |
| HM       | Less than bachelor degree level |
| HN       | Bachelor’s degree level |
| HO       | Master’s degree level |
| HP       | Doctoral level |
| HQ       | Group setting |
| HR       | Family/couple with client present |
| HS       | Family/couple without client present |
| HT       | Multi-disciplinary team |
| HU       | Funded by child welfare agency |
| HV       | Funded state addictions agency |
| HW       | Funded by state mental health agency |
| HX       | Funded by county/local agency |
| HY       | Funded by juvenile justice agency |
| HZ       | Funded by criminal justice agency |
| J1       | Competitive acquisition program no-pay submission for a prescription number |
| J2       | Competitive acquisition program, restocking of emergency drugs after emergency administration |
| J3       | Competitive acquisition program (CAP), drug not available through cap as written, reimbursed under average sales price methodology |
| J4       | DMEPOS item subject to DMEPOS competitive bidding program that is furnished by a hospital upon discharge |
| J5       | Off-the-shelf orthotic subject to DMEPOS competitive bidding program that is furnished as part of a physical therapist or occupational therapist professional service |
| JA       | Administered intravenously |
| JB       | Administered subcutaneously |
| JC       | Skin substitute used as a graft |
| JD       | Skin substitute not used as a graft |
| JE       | Administered via dialysate |
| JG       | Drug or biological acquired with 340b drug pricing program discount |
| JW       | Drug amount discarded/not administered to any patient |
| K0       | Lower extremity prosthesis functional level 0 - does not have the ability or potential to ambulate or transfer safely with or without assistance and a prosthesis does not enhance their quality of life or mobility |
| K1       | Lower extremity prosthesis functional level 1 - has the ability or potential to use a prosthesis for transfers or ambulation on level surfaces at fixed cadence, typical of the limited and unlimited household ambulator |
| K2       | Lower extremity prosthesis functional level 2 - has the ability or potential for ambulation with the ability to traverse low level environmental barriers such as curbs, stairs or uneven surfaces, typical of the limited community ambulator |
| K3       | Lower extremity prosthesis functional level 3 - has the ability or potential for ambulation with variable cadence, typical of the community ambulator who has the ability to traverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion |
| K4       | Lower extremity prosthesis functional level 4 - has the ability or potential for prosthetic ambulation that exceeds the basic ambulation skills, exhibiting high impact, stress, or energy levels, typical of the prosthetic demands of the child, active adult, or athlete |
| KA       | Add on option/accessory for wheelchair |
| KB       | Beneficiary requested upgrade for ABN, more than 4 modifiers identified on claim |
| KC       | Replacement of special power wheelchair interface |
| KD       | Drug or biological infused through DME |
| Terminology                        | Explanation                                                                                                                                                                                                 |
|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 11 deoxycortisol                  | A precursor of cortisol; a steroid hormone, also known as Compound S.                                                                                                                                 |
| Abscess                           | A collection of pus in a walled off sac or pocket, the result of infection.                                                                                                                                    |
| ACE-inhibitors                    | A class of drugs known as antihypertensives, which are taken to aid in the reduction of hypertension or blood pressure.                                                                                       |
| Acetic anhydride                  | Colorless liquid with pungent smell that pharmaceutics companies use in the manufacture of aspirin.                                                                                                           |
| Acid fast bacilli                 | Also called AFB, these bacteria resist loss of stain color when treated with a dilute acid, and are part of the taxonomic class bacillus that are typically rod shaped bacteria.                                      |
| Acid-base balance                 | The condition of the balance between the acid ions and the base or alkaline ions, a delicate mechanism, which controls the pH or acidity-alkalinity in the body.                                              |
| Acidosis                          | Increased acidity in the blood due to increased hydrogen ions, causing a decrease in pH below 7.35; this affects all body functions especially metabolism and respiration.                                      |
| Aciduria                          | The presence of acid in urine, particularly in abnormal amounts.                                                                                                                                                |
| Acute                             | A medical condition or injury of sudden onset, sometimes severe in nature, and typically last a short period of time; opposite of chronic.                                                                    |
| Acute circulatory failure         | A sudden drop in cardiac output.                                                                                                                                                                             |
| Acute coronary syndrome           | Conditions caused by sudden loss of blood supply to the heart because of a blockage; these include but are not limited to unstable angina and heart attack.                                                       |
| Acute lymphoblastic anemia        | A sudden abnormal rise in production by the body of a kind of white blood cell called a lymphoblast; usually found in the bone marrow, a large number of these immature cells replace the normal healthy cells, thereby causing life threatening symptoms. |
| Acute tubular necrosis            | A condition involving the death of cells that form the tubules of the kidneys; this condition commonly leads to acute kidney injury.                                                                           |
| Addison's disease                 | A serious chronic condition caused by a reduction of hormones produced by the adrenal cortex, located on the upper pole of each kidney.                                                                            |
| Adenoma                           | A benign tumor with glandular structure or origin that may secrete hormones or affect hormone production.                                                                                                         |
| Adenosine triphosphate, or ATP    | A molecular unit that consists of adenosine and three phosphate groups that provides the main source of energy within cells for metabolism.                                                                    |
| Adenovirus                        | DNA viruses; different types of which cause respiratory infections, conjunctivitis, and gastroenteritis.                                                                                                        |
| Adrenal cortex                    | The gland located on the upper portion of each kidney, with the cortex being the outer portion of that gland.                                                                                                                                                         |
| Adrenal gland                     | A small gland located on the upper pole of each kidney that secretes hormones directly into the blood.                                                                                                                                                                    |
| Adrenal hormones                  | The adrenal glands produce hormones that are responsible for functions such as heart rate control and blood pressure; they also produce the stress hormone, commonly known as the flight or fight hormone, in addition to many more. |
| Adrenocortical                    | Pertaining to hormones produced by the outer portion, or cortex, of the adrenal gland, located on the upper pole of each kidney.                                                                                                                                           |
| Adrenocorticotropic hormone, or ACTH | A hormone secreted by the pituitary gland in the brain that acts to regulate the cortex, or outer region, of the adrenal gland.                                                                                                                                                |
| Adrenogenital hyperplasia         | A congenital disorder caused by the lack of the enzyme 21 hydroxylase, which involves the adrenal glands and affects cortisol production, a necessary hormone for growth, blood pressure, and other vital functions. |
| Aerobic                           | Indicating the presence of air or oxygen; in microbiology, referring to growth in the presence of air or oxygen.                                                                                                                                                           |
| Affinity                          | Attraction; what makes one element or substance in a compound combine with another element or substance.                                                                                                                                                                   |
| Affinity separation               | A biochemical method of dividing substances by binding their specific antigens to specific antibodies.                                                                                                                                                                    |
| Agar                              | A gelatinous material derived from algae that labs often mix with nutrients and other desired substances for use as a solid substrate on which to culture or grow microorganisms or other cells.                     |
| Agglutination                     | Clumping.                                                                                                                                                                                               |
| **Terminology**         | **Explanation**                                                                                                                                 |
|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Autoantibody           | A protein produced in the blood that attacks the patient’s own body and causes damage to cells and tissue.                                   |
| Autoimmune disease     | A condition characterized by a body producing antibodies against its own cells, tissues, or organs.                                        |
| B cells, or B lymphocytes | Cells present in the bone marrow and circulating in the blood and lymph that produce antibodies to fight infections.                      |
| Bacteria               | Single celled microorganisms visible only with a microscope, some of which cause infection.                                                   |
| Bacterial culture      | A laboratory test involving the cultivation of microorganisms or cells in a special growth medium.                                             |
| Bacterial vaginosis    | Increased number of bacteria in the vagina causing a shift in the normal pH, leading to infection.                                           |
| Bacteriuria            | A significant number of bacteria in the urine; a possible urinary tract infection.                                                            |
| Basophils, or mast cells | White blood cells of the granulocytic series that produce histamine; comprise only about one percent of the total white blood cells, or leukocytes, in the circulation. |
| Bath salts             | Designer, recreational drugs that create a sense of joy, happiness, and excitement, on administration; so called because they resemble legal bathing products. |
| Benign                 | Not malignant, generally treatable or not needing treatment.                                                                               |
| Beta hemolytic         | A property exhibited by some bacteria, commonly some types of streptococcus, that causes a zone of clearing around a bacterial colony growing on an opaque agar, a nontransparent gelatinous material often used in lab tests. |
| Beta-carotene          | A red pigment found in some plants, fruits, and vegetables such as carrots that is converted to vitamin A in the intestine.                  |
| Beta-galactoside       | The glycoside, sugar bound to another group, that is formed from the sugar galactose.                                                        |
| Biliary cirrhosis      | Liver disease that damages the small ducts of the liver; a long term disease; this gradually damages the organ.                             |
| Bilirubin              | A bile pigment produced from hemoglobin during red blood cell breakdown; it causes the yellow discoloration of skin and eyes in patients with jaundice. |
| Bioinformatics         | The analysis of biological and chemical information using computers.                                                                         |
| Biomarker or biological marker | A measurable substance that is an indicator of a condition, disease, or normal or abnormal process.                                      |
| Biopsy                 | To remove a portion or the entirety of suspicious tissue for pathologic examination; types of biopsies include excisional, incisional, punch, needle, open. |
| Bladder                | A muscular organ that receives, stores, and transmits fluids; the urinary bladder stores urine; the gallbladder stores bile.               |
| Blastogenesis          | Conversion of white blood cells into a larger form before undergoing mitosis, or cell division.                                              |
| Blastomere             | A cell produced by division of a fertilized egg, usually after three days; contains chromosomes from the egg that may be used for genetic testing. |
| Blood brain barrier or BBB | Selectively permeable membrane that prevents certain substances from entering the brain.                                                |
| Blood factors          | Various components in plasma that facilitate blood clotting.                                                                               |
| Blood spot card        | A filter paper material that blood is collected on, to be used for certain analytical tests.                                                 |
| Blood transfusion      | Introduction of blood or blood components from one person into the bloodstream of another person.                                           |
| Bone marrow            | Substance within the internal cavity of a bone; a source of stem cells, which ultimately develop into red blood cells, white blood cells, and platelets. |
| Bone marrow transplant | A procedure to replace damaged or destroyed bone marrow with healthy bone marrow cells.                                                     |
| Breakpoint             | Location of chromosome breakage during translocation.                                                                                      |
| Bronchi                | Airways that branch from the bronchi.                                                                                                       |
| Bronchioles            | Airways that branch from the bronchi.                                                                                                       |
| Bronchiolitis          | Viral infection of smaller air passages, typically affecting small children.                                                                  |
| Bronchoscopy           | A diagnostic procedure in which a fiberoptic scope with a light and camera is inserted into the nose or mouth, down the throat, and into the lungs to view abnormalities and collect specimens. |
| C cell hyperplasia     | A thyroid condition that indicates a patient may develop medullary thyroid cancer.                                                            |
| C peptide              | A peptide produced by the beta cells in the pancreas; connects insulin’s A and B chain in the proinsulin molecule, the precursor to insulin. |
| C-13                   | An abbreviation for the non-radioactive isotope carbon-13, one of the 15 known isotopes of carbon, frequently used for clinical laboratory testing purposes. |
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