

LABORATORY & PATHOLOGY SERVICES

Policy

AllWays Health Partners reimburses participating clinical laboratory and pathology providers for medically necessary services for the diagnosis, treatment, and prevention of disease, and for the maintenance of the health of AllWays Health Partners members.

AllWays Health Partners partners with eviCore for authorization requirements on certain high technology imaging services, ultrasound services, and cardiac studies. In addition, authorization through eviCore is required for radiation therapy and certain lab services.

Effective dates for the eviCore partnership and prior authorization process are as follows:

- **8/1/2016** for Lab Services and Genetic Testing

Prior authorization for laboratory and genetic testing services must be obtained by: [eviCore](#)

Provider portals for online prior authorization requests can be found here:

- Laboratory Services and Genetic Testing:
 - www.carecorenational.com

Contact eviCore toll-free at **888-693-3211** between the hours of **8:00am – 9:00pm EST**

Laboratory requests may **not** be requested via fax.

Reimbursement

Providers are reimbursed according to the plan's network provider reimbursement or contracted rates. Claims are subject to payment edits that are updated at regular intervals.

Covered services are defined by the member's benefit plan. The manner in which covered services are reimbursed is determined by the AllWays Health Partners Payment Policy and by the provider's agreement with AllWays Health Partners. Member liability amounts may include, but are not limited to, copayments, deductible, and/or co-insurance, and will be applied dependent upon the member's benefit plan.

Various services and procedures require referral and/or authorization. Referral and authorization requirements can be located [here](#).

Please reference procedure codes from the current CPT, HCPCS Level II, and ICD-10-CM manuals, as recommended by the American Medical Association (AMA), the Centers for Medicare & Medicaid Services (CMS), and the American Hospital Association. CMS and the AMA revise HIPAA medical codes on a pre-determined basis, including changes to CPT, HCPCS, and ICD-10 codes and definitions.

Please refer to the CMS or CPT guidelines for requisite modifier usage when reporting services. The absence or presence of a modifier may result in differential claim payment or denial.

AllWays Health Partners reviews claims to determine eligibility for payment. Services considered incidental, mutually exclusive, integral to the primary service rendered, or part of a global allowance, are not eligible for separate reimbursement. Please refer to [Coding Provider Payment Guidelines](#) for more information.

All claims are subject to audit services and medical records may be requested from the provider.

AllWays Health Partners Reimburses

- Certain screening labs
- Clinical laboratory tests when performed by a technician under physician supervision
- Individual codes when all components within a panel code have not been performed
- Panel codes when all individual tests within the panel have been performed

AllWays Health Partners Does *Not* Reimburse

- Devices, drugs, procedures, treatments, laboratory and pathology tests that are experimental, investigational as referenced in [Experimental and Investigational](#) medical policy
- Employment drug screening
- Handling fees
- Laboratory and pathology services provided at no charge by the Commonwealth of Massachusetts agencies
- Laboratory and pathology services submitted with an unlisted CPT code when a valid, specified code is available
- Mandated drug testing (i.e. court-ordered, DCF, residential monitoring aka “sober house” testing)
- Paternity blood testing
- Routine venipuncture in conjunction with blood or related laboratory services or evaluation and management services
- Specimen collection
- PLA codes (Proprietary Lab Analyses)

Provider Payment Guidelines and Documentation

- Submit multiple same day services on one line with a count representing the number of services rendered
- Submit laboratory panel codes only when individual tests included in the panel have been performed; if other tests are performed in conjunction with those specified in the panel, bill separately in addition to the panel code
- Submit genetic testing code modifiers with molecular diagnostic codes and cytogenetic studies

- When applicable, report modifier “26” or “TC” in the first modifier field. Claims with these modifiers in the second field are subject to audit and / or denial

Procedure Codes

Please refer to the following eviCore link for the CPT codes that adhere to the guideline and authorization requirement: [eviCore Utilization Management Program](#)

Note: This list of codes may not be all-inclusive.

Code	Descriptor	Comments
0300-0309	Laboratory Revenue Codes	Bill with appropriate CPT/HCPCS code
0310-0319	Pathology Revenue Codes	Bill with appropriate CPT/HCPCS code
36415	Collection of venous blood by venipuncture	Not reimbursable with blood or related lab services or with E/M services
36416	Collection of capillary blood specimen (e.g. finger, heel, ear stick)	Not reimbursable
99000-99002	Handling charges	Not reimbursable

Unlisted Services and Procedures

AllWays Health Partners does not allow submission of Unlisted Codes. See [Unlisted Code Requirement](#)

Related Documents

- [Allways Health Partners Referral and Authorization Guide](#)
- [Experimental and Investigational Medical Policy](#)
- [General Coding and Billing](#)
- [Outpatient Drug Screening and Testing Medical Policy](#)
- [Preimplantation Genetic Testing Medical Policy](#)
- [Vitamin D Screening and Testing in Adults Medical Policy](#)
- [Unlisted Special Report Form](#)
- [Urine Drug Testing](#)

References

AMA-CPT Coding Guidelines

Manual of Laboratory Tests and Services, Massachusetts Department of Public Health, Bureau of Laboratory Sciences, William A. Hinton State Laboratory Institute, Boston, Massachusetts; Fourth Edition, Volume 1 (December 2008) and Sixth Edition, (July 2014)

NHIC (National Heritage Insurance Company) -New England, Provider Education: Reminder to Physicians Ordering Laboratory Tests

Publication History

Topic: Laboratory & Pathology Services	Owner: Network Management
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<i>July 24, 2009</i>	<i>Original documentation</i>
<i>April 19, 2011</i>	<i>Member cost sharing language, reference, and disclaimer updated</i>
<i>March 19, 2013</i>	<i>Authorization grid updated</i>
<i>August 1, 2016</i>	<i>Removed definitions, removed modifiers/cost sharing table, added new reimbursement language, updated guidelines, and added AllWays Health Partners relationship with eviCore and the new authorization process</i>
<i>July 15, 2017</i>	<i>Annual review; updated “Related Documents” section; updated guidance regarding Unlisted codes; addition of information on non-reimbursed services</i>
<i>January 8, 2018</i>	<i>Document review; removal of outdated text; addition of Urine Drug Testing PPG link</i>
<i>January 1, 2019</i>	<i>Document restructure; codes, code descriptor and references updated</i>

This document is designed for informational purposes only. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization/notification and utilization management guidelines when applicable, adherence to plan policies and procedures, claims editing logic, and provider contractual agreement. In the event of a conflict between this payment guideline and the provider’s agreement, the terms and conditions of the provider’s agreement shall prevail. Payment policies are intended to assist providers in obtaining AllWays Health Partners ' payment information. Payment policy determines the rationale by which a submitted claim for service is processed and paid. Payment policy formulation takes into consideration a variety of factors including: the terms of the participating providers 'contract(s); scope of benefits included in a given member’s benefit plan; clinical rationale, industry-standard procedure code edits, and industry-standard coding conventions.

AllWays Health Partners includes AllWays Health Partners, Inc. and AllWays Health Partners Insurance Company.