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ICD-10 A. B. WEI	C LCOME TO	 MEDICARE VISIT	Medicare Paties 1. Only order tests			essarv fo	or the diagnosis	s and treat	ment of a na	tient
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Duplicate test orders on the same date of service result in a denial on insurance claims. Refer to the chart below for overlapping tests within a panel. Order the panel that has the majority of the tests you want and order all other tests individually. This will eliminate duplicate billing and also reduce costs associated with running the duplicate.

	PANELS				
TESTS	HFP*	CMP*	RENAL*	BMP*	ELECTROLYTES*
Albumin	X	X	X		
Alkaline Phosphatase	X	X			
ALT	X	X			
AST	X	X			
Calcium		X	X	X	
Carbon Dioxide		X	X	X	X
Chloride		X	X	X	X
Creatinine		X	X	X	
Direct Bilirubin	X				
Glucose		X	X	X	
Potassium		X	X	X	X
Phosphorus			X		
Sodium		X	X	X	X
Total Bilirubin	X	X			
Total Protein	X	X			
Urea Nitrogen (BUN)		X	X	X	

^{*}HFP – Hepatic Function Panel (CPT 80076) *Comprehensive Metabolic Panel (CPT 80053) *Renal – Kidney CPT 80069 *BMP – Basic Metabolic Panel (CPT 80048) *Electrolyte – CPT 80051

Lipid Panel – CPT 80061 (includes Cholesterol, Triglycerides, HDL and LDL)

Prenatal Panel - CPT 80055 (includes CBC, ABO & Rh, Antibody Screen, Rubella, RPR, HBS Antigen)

Acute Hepatitis Panel – CPT 80074 (includes Hepatitis A Antibody, Hepatitis B Core Antibody, Hepatitis B Surface Antigen, Hepatitis C Antibody).

REFLEX TESTING

An * identifies a test that has a defined reflex test protocol. Based on the result of the test ordered by the physician, additional testing may be performed, reported and billed. Refer to the Pathology Center Test Directory for information on reflex testing protocols.

If additional testing is not desired, indicate by writing "NO REFLEX" when ordering.

NATIONAL COVERAGE DETERMINATIONS (NCD)

The National Coverage Determinations (NCD) are noted on the requisition by a #. The tests covered by the NCD's require ICD-10 codes that support medical necessity. Each NCD lists covered CPT codes. ICD-10 codes for medical necessity, ICD-10 codes that DO NOT support medical necessity, and a list of ICD-10 codes that are never covered. Medicare will not pay for tests that do not support medical necessity.

MEDICARE SECONDARY PAYER (MSP)

The Medicare program requires that claims be paid in the correct order of financial liability. Please verify with Medicare beneficiaries that all insurance information is current and listed in the correct order of payment, 42CFR 489.20 (g) of the Medicare regulations requires that all providers must agree "...to bill other primary payers before billing Medicare..."