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### **PAYMENT POLICY ID NUMBER-15-040**

Original Effective Date: 07/01/2012

Revised: 05/11/2023

# **Laboratory Panels and Components**

THIS PAYMENT POLICY IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS PAYMENT POLICY APPLIES TO ALL LINES OF BUSINESS AND PROVIDERS OF SERVICE. IT DOES NOT ADDRESS ALL POTENTIAL ISUES RELATED TO PAYMENT FOR SERVICES PROVIDED TO FLORIDA BLUE MEMBERS AS LEGISLATIVE MANDATES, PROVIDER CONTRACT DOCUMENTS OF THE MEMBER'S BENEFIT COVERAGE MAY SUPERSEDE THIS POLICY.

### **DESCRIPTION:**

Organ and disease-oriented panels are defined in the Pathology and Laboratory section of the CPT® Manual. These panels were developed for coding purposes and are listed with the defined components of each panel. This policy describes Florida Blue's reimbursement methodology for laboratory panel procedures and the individual component procedures.

### **REIMBURSEMENT INFORMATION:**

When Florida Blue receives a claim for all of the individual laboratory procedures in a panel, those components will be bundled, and reimbursement will be based upon the appropriate panel code.

Florida Blue also considers an individual component code included in the reimbursement for the comprehensive panel code when reported on the same date of service by the same provider. CPT® guidelines also state, "Do not report two or more panel codes that include any of the same constituent tests performed from the same patient collection. If a group of tests overlaps two or more panels, report the panel that incorporates the greater number of tests to fulfill the code definition and report the remaining tests using individual test codes."

In addition, for reimbursement purposes, Florida Blue will bundle the individual component codes into the appropriate comprehensive panel code when the combined reimbursement for the individual component codes exceeds the reimbursement for the panel code. Panels and components for these codes are identified below.

The place of service code (POS) for all laboratory services should reflect the location where the laboratory specimen was collected, regardless of whether a global, technical, or professional component of the service is being billed.

# For example:

- If the specimen is obtained in an independent laboratory or reference laboratory, POS 81 is reported.
- If the specimen is obtained in a facility setting, the appropriate facility POS is reported [e.g., POS 21 (inpatient hospital) or POS 22 (outpatient hospital)].
- If the specimen is obtained in an office/clinic or other non-facility setting, the appropriate non-facility POS is reported [e.g., POS 11 (office)].
- If the specimen is obtained in a laboratory setting maintained by another physician or other qualified health care professional in their office/clinic, POS code 99 for "Other Place of Service" is reported.

### **BILLING/CODING INFORMATION:**

The following codes may be used to describe comprehensive Organ or Disease-Oriented Laboratory Panels and their components.

# **CPT® Coding**

80047	Basic metabolic panel (Calcium, ionized)
	Components:
82330	Calcium, ionized
82374	Carbon dioxide (bicarbonate)
82435	Chloride
82565	Creatinine
82947	Glucose
84132	Potassium
84295	Sodium
84520	Urea Nitrogen (BUN)

80048	Basic metabolic panel (Calcium, total)
	Components:
82310	Calcium, total
82374	Carbon dioxide (bicarbonate)
82435	Chloride
82565	Creatinine
82947	Glucose
84132	Potassium
84295	Sodium
84520	Urea Nitrogen (BUN)

80050	General health panel
	Components:
80053	Comprehensive metabolic panel
84443	Thyroid stimulating hormone (TSH)
	Plus, one of the following CBC or combination of CBC components:
85025	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC, and platelet count) and automated differential WBC count
85027 + 85004	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count <b>AND</b> Blood count; automated differential WBC count
85027 + 85007	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count <b>AND</b> Blood count; blood smear, microscopic examination with manual differential WBC count
85027 + 85009	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count AND Blood count; manual differential WBC count, buffy coat

80051	Electrolyte panel
	Components:
82374	Carbon dioxide (bicarbonate)
82435	Chloride
84132	Potassium
84295	Sodium

80053	Comprehensive metabolic panel
	Components:
82040	Albumin
82247	Bilirubin, total
82310	Calcium, total
82374	Carbon dioxide (bicarbonate)
82435	Chloride
82565	Creatinine
82947	Glucose
84075	Phosphatase, alkaline
84132	Potassium
84155	Protein, total
84295	Sodium
84460	Transferase, alanine amino (ALT) (SGPT)
84450	Transferase, aspartate amino (AST) (SGOT)
84520	Urea Nitrogen (BUN)

80055	Obstetric panel
	Components:
87340	Hepatitis B surface antigen (HBsAg)
86762	Antibody, rubella
86592	Syphilis test, non-treponemal antibody; qualitative (e.g., VDRL, RPR, ART)
86850	Antibody screen, RBC, each serum technique
86900	Blood typing, ABO
86901	Blood typing, Rh (D)
	Plus, one of the following CBC or combination of CBC components:
85025	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85027 + 85004	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count <b>AND</b> Blood count; automated differential WBC count
85027 + 85007	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count <b>AND</b> Blood count; blood smear, microscopic examination with manual differential WBC count
85027 + 85009	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count AND Blood count; manual differential WBC count, buffy coat

80061	Lipid panel
	Components:
82465	Cholesterol, serum, total
83718	Lipoprotein, direct measurement, high density cholesterol (HDL)
84478	Triglycerides

80069	Renal function panel
	Components:
82040	Albumin
82310	Calcium, total
82374	Carbon dioxide (bicarbonate)
82435	Chloride
82565	Creatinine
82947	Glucose
84100	Phosphorus inorganic (phosphate)
84132	Potassium
84295	Sodium
84520	Urea Nitrogen (BUN)

80074	Acute hepatitis panel
	Components:
86709	Hepatitis A antibody (HAAb), IgM antibody
86705	Hepatitis B core antibody (HBcAb), IgM antibody
87340	Hepatitis B surface antigen (HBsAg)
86803	Hepatitis C antibody

80076	Hepatic function panel
	Components:
82040	Albumin
82247	Bilirubin, total
82248	Bilirubin, direct
84075	Phosphatase, alkaline
84155	Protein, total
84460	Transferase, alanine amino (ALT) (SGPT)
84450	Transferase, aspartate amino (AST) (SGOT)

80081	Obstetric panel (includes HIV testing)
	Components:
87340	Hepatitis B surface antigen (HBsAg)
87389	HIV-1 antigen(s) with HIV-1 & HIV-2 antibodies, single result
86762	Antibody, rubella
86592	Syphilis test, non-treponemal antibody; qualitative (e.g., VDRL, RPR, ART)
86850	Antibody screen, RBC, each serum technique
86900	Blood typing, ABO
86901	Blood typing, Rh (D)
	Plus one of the following CBC or combination of CBC components:
85025	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85027 + 85004	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count <b>AND</b> Blood count; automated differential WBC count
85027 + 85007	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count <b>AND</b> Blood count; blood smear, microscopic examination with manual differential WBC count
85027 + 85009	Blood count; complete (CBC) automated (Hgb, Hct, RBC, WBC and platelet count <b>AND</b> Blood count; manual differential WBC count, buffy coat

### RELATED MEDICAL COVERAGE GUIDELINES OR PAYMENT POLICIES:

N/A

### REFERENCES:

- 1. American Medical Association, Current Procedural Terminology (CPT®), Professional Edition.
- 2. Centers for Medicare & Medicaid Services (CMS) Physician Fee Schedule Relative Value File at: <a href="https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files.html">https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files.html</a>

#### **GUIDELINE UPDATE INFORMATION:**

07/01/2012	Policy implemented
05/08/2015	Document approved by Payment Policy Committee
05/15/2016	Annual review – added new panel 80081
05/11/2017	Annual Review
05/17/2018	Annual Review
05/16/2019	Annual Review: added 80051 – electrolyte panel
05/14/2020	Annual Review
05/13/2021	Annual Review
05/12/2022	Annual Review
05/11/2023	Annual Review – Language added for billing POS of laboratory specimens. References reviewed and updated.

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