# ✓ HENRY SCHEIN® 983, Henry Schein – Diagnostic Products Reimbursement Reference

# Diagnostic Reimbursement Reference for your 2012–2013 CPT Codes!

<i>(</i>	Allergy Testing <sup>4</sup>		
CPT- 8600	3*	N	ational Limit \$7.39
(406-568	Eastern Panel (combines IgE foods)	20/box	
(406-960	3) Northeastern Inhalant Panel	20/box	
(618-751	6) Northwestern Inhalant Panel	20/box	Moderately
(905-011	Pediatric Comprehensive Panel	20/box	Complex
(406-389	5) Southeastern Inhalant Panel	20/box	- 1
(259-491	2) Southern Panel (IgE foods & Inhalants)	20/box	
(406-558	5) Southwestern Inhalant Panel	20/box	<b>\</b>
(168-639	P) Western Inhalant Panel	20/box	

<sup>4</sup> Allergen Specific IgE; Quantitative or Semiquantitative, each Allergen (12 allergen panel x 12; 25 allergen panel x 25; 36 allergen panel x 36) source: www.hcdiagnostics.com for informational purposes only.

	Bladder Ca	ncer	
CPT- 862940	)W*	National L \$27.99	
(641-0001)	Status BTA Test	25/box	

7	Le	ad Testi	ing		\
CPT- 836550	)W*			No	itional Limit \$17.15
(106-5736)	Lead Test Kit			48/box	Waived
	4 .	-0 0-0			

_		
		National Limit \$16.99
junctivitis Test	еа	Waived
	junctivitis Test	junctivitis Test ea

\*Reimbursement information provided is the CMS National Limit for 2012. Available at www.cms.hhs.gov/clinicalLabfeesched/02\_clinlab.asp CPT is a registered trademark of the American Medical Association. The CPT codes provided are based on AMA coding guidelines and are for informational purposes only. Selection of appropriate codes is the sole responsibility of the billing party. Providers should check with their contracted payers for appropriate codes prior to submitting claims. The information provided is current as of 4/16/2012 and was obtained from publicly available sources and is subject to change without notice. All content is for informational purposes only, is general in nature and does not cover all situations or all payers' rules and policies. Check with your insurance provider for correct code to use.

## HENRY SCHEIN®

to order: 1.800.772.4346 (8am-9pm) to fax: 1.800.329.9109 (24 hr) www.henryschein.com/medical



Drugs of Abuse Testing 5

(395-0031) iScreen DX Single Dip - Amphetamine 25/box Waived

-methamphetamine (MDMA/Ecstasy) 25/box Waived

25/box Waived

25/box Waived

25/box Moderate

25/box Moderate

CPT- G0434QW\* 80104 Private Pay QW\*

(395-0035) iScreen DX Single Dip - Cocaine

(395-0039) iScreen DX Single Dip - Opiate
(395-0043) iScreen DX Single Dip - Methylenedioxy

(395-0040) iScreen DX Single Dip - Phencyclidene
 (395-0041) iScreen DX Single Dip - Antidepressants
 (395-0042) iScreen DX Single Dip - Marijuana
 (673-2588) iCup 5 Panel Drug-Screen

(459-0007) iCassette 11 Panel Drug-Screen

(834-8806) Triage Drugs of Abuse 7 Panel

(131-0824) Triage TOX Drug Screen Panel

† QW Modifier not to be used for moderately complex tests.

<sup>5</sup> CPT Codes valid as of 4/16/12. CPT codes subject to change in 2013.





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ue to manufacturer price increases, prices are subject to change without notification. Offer valid on ou ull array of products, excluding flu vaccine and Synagis. Upon any request by Medicare, Medicaid, Tricare or other payer, you must report the value of any benefit received from a discount program (e.g., points redemptions, gifts or other special awards), ©2012 Henry Schein, Inc. to see the properties of the promotions and/or special contract pricing. Void where prohibited. Local regulatory requirements may apply to use or installation of certain products. It is your responsibility to understand and comply with any such requirements prior to purchase, use or installation of products. Ffor informational purposes only. Source: ReimbursementCodes.com and/or www.cms.gov. Customer is responsible for verification of billing/coding in accordance with applicable specific icroumstances.

2MS6730



### **Henry Schein DxRx Solutions**

#### We're there when you need us with our DxRx Solutions Hotline

Do you have questions regarding the diagnostic, pharmaceutical and vaccine items that you purchase from Henry Schein? Need help finding a CPT code, package insert, or looking for brand to generic comparisons?

The Henry Schein DxRx Solutions Hotline provides information on the following topics for diagnostics, pharmaceuticals and vaccines:

- Indications and usage as provided on a package insert
- Package inserts
- Brand to generic comparisons
- CPT codes and J codes\*

\*For informational purposes only. Source: Reimbursement Codes.com and/or www.cms.gov <a href="http://www.cms.gov">http://www.cms.gov</a>. Customer is responsible for verification of billing/coding in accordance with applicable specific circumstances.

\*\*For informational purposes only; does not constitute legal advice. Source: www.immunize.org

# HENRY SCHEIN®





- CLIA Product Status
- Storage Requirements
- ACIP recommendations for vaccinations
- State Law requirements for school and day care entry\*\*
- Latest updates on supply issues, and much more





1.877.523.SHOT 8:30am-5:00pm, est 1.877.523.7468 dxrxsolutions@henryschein.com





#### **Respiratory Testing**

Na	
\$16	tional Limit .99/16.99
27/box 1	Moderate <sup>1</sup>
22/box 25/box ntial 25/box	Waived Waived Waived
	\$16 27/box I 22/box 25/box

QW Modifier not to be used for moderatly complex tests. \*\* Reimbursement amount per test. If results for both Influenza A&B are ordered use 87804QW for A and 87804QW, 59 for B. <sup>6</sup> BD Veritor Also use CPT 87999 for using the objective and differentiated reader system

	RSV Testing	
CPT-87807QW*		Natio

L	CPT-87807QW*		No	itional Limit \$16.99
ſ	(512-8933)	Clearview RSV	20/box	Waived
l	(301-8899)	BinaxNOW RSV	10/box	Waived
l	(512-5059)	BinaxNOW RSV	22/box	Waived
l	(227-0581)	QuickVue RSV	20/box	Waived

Strep A Testing			
CPT-87880QW* National Li \$16.99			itional Limit \$16.99
(102-7617)	OSOM Ultra Strep A Dipstick	52/box	Waived
(224-7320)	OSOM Strep A Dipstick	52/box	Waived
(107-4050)	Henry Schein One Step+ Dipstick	25/box	Waived
(900-4051)	Henry Schein One Step+ Cassette	25/box	Waived
(512-9939)	Acceava Strep A Dipstick	50/box	Waived
(227-0611)	QuickVue Strep A Dipstick	50/box	Waived
(227-4207)	QuickVue Strep A In-Line	25/box	Waived

#### **Infectious Disease Testing**

7	Mononucleosis		
CPT-86308QW*		Nat	ional Limit \$7.33
(900-4070)	OneStep+ Mono	20/box	Waived <sup>†</sup>
(112-5547)	OneStep Pro+Mono	20/box	Waived†
(327-3297)	OSOM Mono	27/box	Waived†
(111-7123)	ICON Mono Test	30/box	Waived <sup>†</sup>
(227-0024)	QuickVue+ Mononucleosis		Waived <sup>†</sup>

† The tests are waived for whole blood only. Serum/Plasma are moderately complex tests.

Hepatitis C		
CPT-86803Q	W*	National Lim \$20.22
(810-0012)	Ora Quick® HCV Test	25/box Waived
(810-0013)	Ora Quick® HCV Test	100/box Waived

#### Infectious Disease Testing (cont'd)

	H. Pylori Testing				
	CPT- 86318QW*-Whole Blood National Limi 86677*-Serum/Plasma \$18.34/\$20.56				
(370-9222)	Test Capsules Ulcer Detects	10/case	Waived†		
(106-0064)	Test Capsules 12C - Urea Breaths	100/case	Waived†		
(900-4071)	OneStep+ H.pylori Cassette	20/box	Waived†		
(309-0040)	OSOM H.pylori*	25/box	Waived†		
(227-5158)	QuickVue H.pylori GII*	10/box	Waived†		
(227-2170)	QuickVue H.pylori GII*	30/box	Waived†		

#### **STD Testing**

	Chlamydia	
CPT-87810*		National Limit \$16.99
(227-0527)	QuickVue Chlamydia Test	25/box Moderate

	bacteriai vagino	515	
CPT- See Bel	low*		itional Limit See Below
(414-4170)	OSOM BV Blue • CPT Code: 87905QW * 2011 National Limit: \$17.31	25/box	Waived
(411-0001)	VS-Sense Test • CPT Code: 83986QW * 2011 National Limit: \$5.07	25/box	Waived

	Herpes	
CPT-86696*		National Limit \$27.41
(630-3080)	BioKit HSV-2 Rapid Test	20/box

(030-3000)	Diokii 1134-2 Kupiu 1631	20/ 000
	HIV	,
CPT-86703Q	<b>W</b> *	National Limit \$19.43
(512-9386)	Clearview HIV 1/2 Stat-Pak	20/box Waived†
(512-1454)	Clearview Complete HIV 1/2	25/box Moderate
(810-3221)	OraQuick HIV 1/2	25/box Waived
(810-6864)	OraQuick HIV 1/2	100/box Waived
The tests are waived for w	hala blood only Carum/Placma are moderately come	lov tosts

Trichomonas

CPT-87808QW\* National Limit \$16.99 (406-7631) OSOM Trichomonas 25/box Waived

#### **Pregnancy Testing**

Urine Uniy			
CPT-81025QW*		Na	tional Limit \$8.96
236-2470)	OSOM hCG Urine Dipstick	50/box	Waived
327-0743)	OSOM hCG Urine Card	25/box	Waived
900-4072)	Henry Schein OneStep+ hCG Urine Strip	25/box	Waived
900-4073)	Henry Schein OneStep+ hCG Urine Cassette	25/box	Waived
900-4074)	Henry Schein OneStep+ hCG Urine Cassette	100/box	Waived
227-6481)	QuickVue One-Step hCG Urine	25/box	Waived

	Combo Kits		
CPT-81025Q 84703* (seru	W* (urine) um)		ational Limit 4 Serum
(327-9522)	OSOM hCG Combo	,	Waived <sup>2</sup>
(900-4075)	Henry Schein OneStep+ hCG Combo	25/box	Waived <sup>2</sup>
(371-6739)	QuickVue+ One-Step hCG Combo	30/box	Waived <sup>2</sup>
(371-1811)	QuickVue+ One-Step hCG Combo	90/box	Waived <sup>2</sup>
(227-7244)	QuickVue+ One-Step hCG Combo	50/box	Waived <sup>2</sup>

<sup>2</sup> Combo tests are classified as moderate when testing serum samples. QW Modifier not to be used for moderately complex tests.

CPT-81000\*-Urinalysis, Non-automated, with microscopy

#### **Urinalysis Testing**

National Limit \$4.48

CPT-81002*-Urinalysis, National Limit Non-automated, without microscopy \$3.62			
CPT-81003QW*-Urinalysis, automated without microscopy		Nati	onal Limit \$3.18
CPT-81001*- automated w	Urinalysis, ith microscopy	Nati	onal Limit \$4.48
(900-4994)	Urispec 10 SG	100/bt	Waived
(900-4995)	Urispec 5 OB	100/bt	Waived
(224-7320)	Urispec 2 GP	52/bt	Waived
(147-5913)	Multistix 10SG	100/bt	Waived
(147-4912)	Multistix 4-Way	100/bt	Waived
(147-0768)	Multistix 5 Reagent Strip	100/bt	Waived
(891-8002)	Chemstrip 10SG	100/bt	Waived
(891-4205)	Chemstrip 10MD	100/bt	Waived
(891-4294)	Chemstrip 50B	100/bt	Waived
(891-5552)	Chemstrip GP	100/bt	Waived
(102-2285)	Henry Schein Urispec 11-Way	100/bt	Waived
(107-7157)	Henry Schein Urispec 4-Way	100/bt	Waived
(100-6567)	Henry Schein Urispec GP+A	100/bt	Waived
CPT-82570Q	W*	National Lin	nit \$7.33
(147-2360)	Multistix PRO 10 LS	100/bt	Waived
CPT-81007QW*		National Lin	nit \$3.63
(106-9335) Accutest Uriscreen (Urinary Tract) 20/box Waive		Waived	
CPT-51741-Uroflowmetry \$25.00		\$25.00	
(112-5811) Flow-Med Uroflowmeter ea NON-CLIA R		CLIA Reg.	

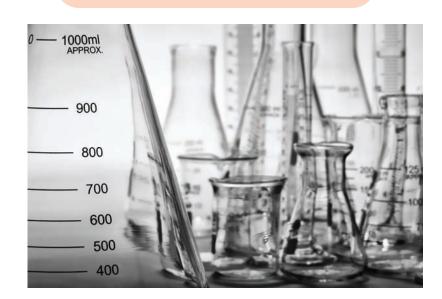
#### **Thyroid Testing**

CPT-84443QW*	National Limit \$23.80
(818-0009) Thyrochek	20/box Waived

#### **Fecal Occult Blood Testing**

	Guiac		)
CPT-82270*; G0394* Loca			ional Limit \$4.61
(147-1246)	Henry Schein One Step Occult Blood Single Slide	100/box	Waived
(147-7182)	Henry Schein OneStep Occult Blood Patient Mailer	50/box	Waived
(254-9052)	Hemoccult Single-Test Card	100/box	Waived
(254-4454)	Hemoccult II SENSA Dispensapak Plus	40/box	Waived
(254-5748)	Hemoccult II Dispensapak Plus	40/box	Waived

Immunochemical			
CPT-82274QW* Diagnostic National Limit G0328QW*-Screening \$22.53			
(450-0008)	InSure FIT Combo Pack 25/35	25/box	Waived
(450-0009)	InSure FIT Combo Pack 25/25	25/box	Waived
(792-8076)	Hemosure iFOB Complete Test Kits	30/box	Waived
(900-4413)	Henry Schein OneStep+ iFOB Complete Test Kits	25/box	Waived
(900-4414)	Henry Schein OneStep+ iFOBT Cassettes	10/box	Waived
(950-2866)	QuickVue iFOB Complete Test Kits	20/box	Waived



#### **Cardiovascular Care**

Cardiac Panels

CPT-See Below*		National Li See Belov
(131-7507)	Triage BNP (B-type natriuretic peptide) 25/	/box
	CPT - 83880QW* National Limit \$48.08	
(600-5715)	Triage Profiler Shortness of Breath Panel	25/box
	<ul> <li>Natriuretic Peptide Panel - CPT - 83880*; 2011 Nati</li> </ul>	onal Limit - \$48.08
	<ul> <li>Myoglobin Panel - CPT - 83874*; 2011 National Lin</li> </ul>	nit - \$18.29
	<ul> <li>Troponin Quantitative Panel - CPT - 84484*; 2011</li> </ul>	National Limit - \$13.9
	<ul> <li>CK-MB Panel - CPT - 82553*; 2011 National Limit S</li> </ul>	516.35
	<ul> <li>D-Dimer Quantitative Panel - CPT - 85379*; Nation</li> </ul>	al Limit \$14.42
I	0011 11 11 11 11 11 11 11 100	

#### 2011 National limit total for panel — \$111.08 (131-1964) Triage Cardiac Panel 25/box Myoglobin Panel - CPT - 83874\*; 2011 National Limit - \$18.29 • Troponin Quantitative Panel - CPT - 84484\*; 2011 National Limit - \$13.94 CK-MB Panel - CPT - 82553\*; 2011 National Limit \$16.35

2011 National limit total for panel — \$48.58 (104-1093) NexusDx Cardiac STATus Myoglobin/Troponin I/CK-MB Tandem Test Myoglobin Panel - CPT - 83874\*; 2011 National Limit - \$18.29

• Troponin Quanitative - CPT - 84484\*; 2011 National Limit - \$13.94

	• CK-MB Panel - CPT - 82553*; 2011 National Limit \$16.35 2011 National limit total for panel — \$48.58	
(706-7343)	CardioProfiler® Panel	25/Pkg
	<ul> <li>Natriuretic Peptide Panel - CPT - 83880*; 2011 National Limited</li> </ul>	it - \$48.88
	<ul> <li>CK-MB Panel - CPT - 82553*; 2011 National Limit \$16.35</li> </ul>	
	<ul> <li>Myoglobin Panel - CPT - 83874*; 2011 National Limit - \$18.</li> </ul>	29

• Troponin Quantitative Panel - CPT - 84484\*; 2011 National Limit - \$13.94 2011 National limit total for panel — \$96.66 (345-8792) Troponin I Rapid Test 20/Pkg • CPT 84484\* - \$13.94

	Cholesterol Lipids <sup>3</sup>
<b>,</b> *	

CPT-See Below*		National Limit See Below	
(116-9995)	Cholestech Lipid Profile • CPT Code - 80061QW* 2011 National limit total for panel — \$15.76	10/box	
(694-9360)	Cholestech Lipid/Glucose Profile • CPT Code - 80061QW*; 82947QW* 2011 National limit total for panel – \$17.03	10/box	
(608-8836)	Cholestech AST/ALT Cassette • CPT Code - 84460QW*; 84450QW* 2011 National limit total for panel — \$7.37	10/box	
(891-1036)	Accutrend Cholesterol Test Strips • CPT Code - 82465QW* 2011 National limit total for panel — \$6.16	25/box	
(420-7892)	Cholestech TC • CPT Code - 82465QW* 2011 National limit total for panel — \$6.16	10/box	
(956-0149)	Total Cholesterol/Glucose • CPT Code - 82465QW*; 82947QW* 2011 National limit total for panel — \$7.37	10/box	

<sup>3</sup> The national limit for any cassette or cassette combination including Lipid Profile was determined from the three constituent tests of the lipid panel; payers may pay the lesser of the fee schedule amount for an individual automated test panel test or the amount for 1-2 automated tests, so the lesser of the two amounts is shown. Source: www.codemap.com/ alere for informational purposes only.

#### Cardiovascular Care (cont'd)

Prothrombin Time/PT Testing			
CPT-85610Q	W*		National Limit \$5.56
(891-4520)	Roche CoaguChek XS PT Test Strip	48/bo	х
(897-3618)	Hemosense InRatio Coagulation Test Strip	os 48/bo	x
(487-7457)	ProTime Disposable 3-Channel Cuvet	te 25/bo	x
(487-2270)	ProTime Disposable 5-Channel Cuvet	te 25/bo	x

#### **Diabetes Management**

(	hbA1 <sub>c</sub>		
CPT-See Belo	w*	No	itional Limit \$13.75
(147-8045)	DCA HbA1c Reagent Kit • CPT Code - 83036QW*	10/pk	Waived
(430-3504)	Bayer A1C NOW • CPT Code 83037QW*	10/box	Waived

#### **Blood Glucose Testing** CPT-82962QW\*

CI 1-027029	VV	Nu	\$3.32
(567-6191)	OneTouch Ultra Blood Glucose Strips	25/box	Waived
(567-0073)	OneTouch Ultra Blood Glucose Strips	50/box	Waived
(567-0076)	OneTouch Ultra Blood Glucose Strips	100/box	Waived
(147-9303)	Bayer's Contour Blood Glucose Strips	50/box	Waived
(891-0008)	Accutrend Glucose Test Strips	25/box	Waived
	-		

#### **Kidney Function**

CPT- See Below*		National Limit See Below	
(147-8917)	DCA Microalbumin/Creatinine Reagent Kit Albumin - CPT Code 82043* 2011 National Limit \$8.19 Creatinine - CPT Code 82570QW* 2011 National Limit \$7.33	10/box	
(147-2360)	Multistix 10LS Pro Reagent Strips • Creatinine - CPT Code 82570QW* 2011 National Limit \$7.33	100/bt	
(147-4712)	Clinitek Microalbumin Test Strip • Creatinine - CPT Code 82570QW* 2011 National Limit \$7.33 • Albumin - CPT Code 82044QW*	25/box	

2012 National Limit \$6.48