UCI Health

- Date: October 2021
- To: Our Valued Physicians and Providers Ordering Tests from UCI Health Department of Pathology & Laboratory Medicine
- Subject: Annual Notice to Physicians
- From: Edwin S. Monuki, M.D., PhD, Department of Pathology & Laboratory Medicine Chair Sherif Rezk, M.D. Professor of Clinical Pathology & Chief of Laboratory Medicine

UCI Health Department of Pathology & Laboratory Medicine (UCI Health) is committed to full compliance with all applicable federal and state laws and regulations, third party payer requirements, and industry best practices. To that end, and consistent with recommendations of the Office of the Inspector General ("OIG") for the U.S Department of Health and Human Services Compliance Program Guidance for Clinical Laboratories, the purpose of this annual letter is to inform you about certain important laboratory practices and the regulations governing them.

BILLING PRACTICES & CLINICAL LABORATORY FEE SCHEDULE

Medicaid (Medi-Cal) reimbursement amounts will be equal to or less than the amount of Medicare reimbursement. Medicaid (Medi-Cal) rates may be viewed and downloaded at https://files.medi-cal.ca.gov/Rates/RatesHome.aspx. The Medicare Clinical Laboratory Fee Schedule may be viewed and downloaded at: https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ClinicalLabFeeSched/Clinical-Laboratory-Fee-Schedule-Files.

MEDICAL NECESSITY

Medicare will only pay for tests that meet the Medicare coverage criteria and are reasonable and necessary for treatment and diagnosis. Local Coverage Determinations (LCD) and National Coverage Determinations (NCD) specify tests that have limited coverage under Medicare and list covered diagnosis codes for these tests. Physicians must provide ICD-10 codes or diagnoses with all laboratory requests to support medical necessity. Code the condition(s) to the highest degree of certainty for that encounter/visit.

When ordering individual tests or any organ and disease oriented panels, please remember that for laboratories to bill Medicare, each and every test, including each component of a panel, must be medically necessary for the treatment or diagnosis of the particular patient being tested. Physicians/ practitioners should order individual tests or a less inclusive profile if all tests in a panel are not medically necessary for an individual patient. A list of the 2021 AMA defined Organ/Disease Panels performed at UCI Health and their detailed test components is provided attached to this notification. Please note: The AMA list of organ and disease panels does not include molecular and NGS-panels.

A signed Advanced Beneficiary Notice (ABN) should be obtained before service is provided to any outpatient or outreach patient for whom there is reasonable doubt that Medicare will provide coverage for specific lab tests or other services.

REFLEX TESTING

Consistent with best practices and the standards of care in laboratory medicine, pathologists may order additional laboratory tests (reflex tests) on specimens based on their independent judgment and determination of medical necessity for the patient, as well as the results of other adjunct tests performed on a specimen. Please be advised that in the event you order a test from UCI Health Laboratories, any of our pathologists may, in their discretion as the interpreting pathologist, order additional tests on a specimen based on their independent medical judgment and if clinically indicated for the patient.

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Reflex testing and confirmatory testing may be medically indicated when initial test results fall within certain parameters. UCI Health Laboratories use Medical Board/Executive Committee-approved testing algorithms whenever possible to avoid delays in patient care. Laboratory tests that may generate additional testing and the conditions under which they are performed are disclosed within each test's description in the laboratory's online test directory.

CLINICAL CONSULTANT

If you require assistance in ordering the appropriate laboratory tests for your patients, please contact the laboratory at 1-888-UCI-LABS. Your call will be directed to the appropriate medical or scientific director to assist you.

Thank you for your attention in these important matters of mutual concern. For more information about the OIG's compliance requirements, please visit: https://oig.hhs.gov/compliance/physician-education/

To the extent you have questions, please feel free to contact the Laboratory Compliance Office, at the number below.

Melisand Mohseni MT CLS Compliance Manager 714-509-2842

Laboratory Web Site Resources

- UCI Health Laboratory Test Directory: http://www.pathology.uci.edu/services/
- Physician Self-Referral-Stark Law: http://www.cms.gov/PhysicianSelfReferral/
- CMS Clinical Labs Center: http://www.cms.hhs.gov/center/clinical.asp

The Director of Clinical Laboratories is available to assist you with any questions.

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2021 AMA RECOGNIZED ORGAN/DISEASE PANELS OFFERED AT UCI HEALTH (EFF. 1/1/2021)

Note: This list of AMA panels does not include molecular or NGS-panels.

Panel Number	Panel Name and Components		Panel CPT	2021 Medicare Allowable	2021 Medicaio Allowable
AHP	ACUTE HEPATITIS PANEL		80074	\$47.63	\$41.79
	Hepatitis A Ab IgM	Hepatitis B Surface Ag*			
	Hepatitis B Core Ab IgM	Hepatitis C Ab			
	* reflexed to confirmation if positive		87341	\$10.33	\$9.18
<u>BMPAN</u>	BASIC METABOLIC PANEL		80048	8.46	\$7.27
	Calcium, Total	Sodium			
	Carbon Dioxide	Urea Nitrogen			
	Chloride	eBal calculation			
	Creatinine	eGFR calculation			
	Glucose				
	Potassium				
CMPAN	COMPREHENSIVE METABOLIC PANEL		80053	10.56	\$9.28
	Albumin	Potassium			
	Bilirubin, Total	Protein, Total			
	Calcium, Total	Sodium			
	Carbon Dioxide	ALT (SGPT)			
	Chloride	AST (SGOT)			
	Creatinine	Urea Nitrogen			
	Glucose	eBal calculation			
	Phosphatase, Alkaline	eGFR calculation			
ELECPN	ELECTROLYTE PANEL		80051	7.01	\$6.23
	Carbon Dioxide	Potassium			
	Chloride	Sodium			
HFP	HEPATIC FUNCTION PANEL		80076	8.17	\$6.38
	Albumin	Protein, Total			
	Bilirubin, Total	ALT (SGPT)			
	Bilirubin, Direct	AST (SGOT)			
	Phosphatase, Alkaline				
LIPSCN	LIPID PANEL, FASTING		80061	13.39	\$11.54
	Cholesterol	LDL calculated			•
	HDL Cholesterol	VLDL calculated			
	Triglycerides	NHDL calculated			
LIPSC2	LIPID PANEL, NON-FASTING		80061	13.39	\$11.54
	Cholesterol	LDL calculated	•		•
	HDL Cholesterol	VLDL calculated			
	Triglycerides	NHDL calculated			
LIPRTO	LIPID PANEL WITH CHOL/HDL RATIO		80061	13.39	\$11.54
	Cholesterol	LDL calculated			• -
	HDL Cholesterol	VLDL calculated			
	Triglycerides	NHDL calculated			
	0,	Chol/HDL Ratio calculated			
RFP	RENAL FUNCTION PANEL		80069	8.68	\$7.60
	Albumin	Glucose			+ • • • •
	Calcium, Total	Phosphatase, Alkaline			
	Carbon Dioxide	Potassium			
	Chloride	Sodium			
	Creatinine	Urea Nitrogen			