Local Coverage Article:
Billing and Coding: MolDX: Circulating Tumor Cell Marker Assays (A57815)

Links in PDF documents are not guaranteed to work. To follow a web link, please use the MCD Website.

Contractor Information

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Article Information

General Information
CMS National Coverage Policy

Title XVIII of the Social Security Act, §1833(e), prohibits Medicare payment for any claim lacking the necessary documentation to process the claim.
Article Guidance

Article Text:

The following coding and billing guidance is to be used with its associated Local coverage determination.

To report a CTC service, please submit the following claim information:

- Select the appropriate CPT® code
- Enter 1 unit of service (UOS)
- Enter the appropriate DEX Z-Code™ identifier adjacent to the CPT® code in the comment/narrative field for the following Part B claim field/types:
  - Loop 2400 or SV101-7 for the 5010A1 837
  - Item 19 for paper claim
- Enter the appropriate DEX Z-Code™ identifier adjacent to the CPT® code in the comment/narrative field for the following Part A claim field/types:
  - Line SV202-7 for 837I electronic claim
  - Block 80 for the UB04 claim form

Coding Information

<table>
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<tr>
<th>CPT/HCPCS Codes</th>
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<tbody>
<tr>
<td>Group 1 Paragraph:</td>
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<td>CODE</td>
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<tr>
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<td>86153</td>
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CPT/HCPCS Modifiers

N/A

ICD-10 Codes that Support Medical Necessity

Group 1 Paragraph:

N/A

Group 1 Codes:

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<td>XX000</td>
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ICD-10 Codes that DO NOT Support Medical Necessity

N/A

Additional ICD-10 Information

N/A

Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

<table>
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<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
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<tr>
<td>999x</td>
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Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the policy, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

N/A

Other Coding Information

N/A
Revision History Information

N/A

Associated Documents

Related Local Coverage Document(s)

Article(s)
A55593 - Billing and Coding: MolDX: OncoCee™

LCD(s)
L35710 - MolDX: Circulating Tumor Cell Marker Assays

Related National Coverage Document(s)

N/A

Statutory Requirements URL(s)

N/A

Rules and Regulations URL(s)

N/A

CMS Manual Explanations URL(s)

N/A

Other URL(s)

N/A

Public Version(s)

Updated on 11/23/2019 with effective dates 12/01/2019 - N/A

Keywords

- Circulating Tumor
- 86152
- 86153