## Contractor Information

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<th>CONTRACTOR NAME</th>
<th>CONTRACT TYPE</th>
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<td>Noridian Healthcare Solutions, LLC</td>
<td>A and B MAC</td>
<td>01111 - MAC A</td>
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<td>California - Entire State</td>
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## Article Information

### General Information

Created on 12/26/2019. Page 1 of 6
Article ID
A57423

Original Effective Date
11/01/2019

Article Title
Billing and Coding: MolDX: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR)

Revision Effective Date
11/01/2019

Article Type
Billing and Coding

Revision Ending Date
N/A

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CMS National Coverage Policy
Title XVIII of the Social Security Act, §1833(e), prohibits Medicare payment for any claim lacking the necessary
The following coding and billing guidance is to be used with its associated Local coverage determination.

To report a Genetic Testing for Hypercoagulability/Thrombophilia service, please submit the following claim information:

- 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 SV010-7 for the 5010A1 837P
  - 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

### Coding Information

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<th>CPT/HCPCS Codes</th>
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<td><strong>Group 1 Paragraph:</strong></td>
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<td>F2 (PROTHROMBIN, COAGULATION FACTOR II) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, 20210G&gt;A VARIANT</td>
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<td>81241</td>
<td>F5 (COAGULATION FACTOR V) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, LEIDEN VARIANT</td>
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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.

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<th>CODE</th>
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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

<table>
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<th>REVISION HISTORY EXPLANATION</th>
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<tr>
<td>11/01/2019</td>
<td>R1</td>
<td>CMS references are revised.</td>
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Associated Documents

Related Local Coverage Document(s)

Article(s)
A54893 - Response to Comments: MolDX: Genetic Testing for Hypercoagulability / Thrombophilia

LCD(s)
L36155 - MolDX: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR)
DL36133
- (MCD Archive Site)DL36155
- (MCD Archive Site)

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 12/18/2019 with effective dates 11/01/2019 - N/A
Updated on 10/08/2019 with effective dates 11/01/2019 - N/A

Keywords

- 81240
- 81241
- 81291
- Hypercoagulability
- Thrombophilia
- Factor V Leiden
- Factor II Prothrombin
- MTHFR

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• genetic
• MolDx
• pregnant
• thrombophilia
• FVL
• G20210A