

Local Coverage Article: Billing and Coding: MoIDX: Predictive Classifiers for Early Stage Non-Small Cell Lung Cancer (A57329)

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Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
Noridian Healthcare Solutions, LLC	A and B MAC	01111 - MAC A	J - E	California - Entire State
Noridian Healthcare Solutions, LLC	A and B MAC	01112 - MAC B	J - E	California - Northern
Noridian Healthcare Solutions, LLC	A and B MAC	01182 - MAC B	J - E	California - Southern
Noridian Healthcare Solutions, LLC	A and B MAC	01211 - MAC A	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	A and B MAC	01212 - MAC B	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	A and B MAC	01311 - MAC A	J - E	Nevada
Noridian Healthcare Solutions, LLC	A and B MAC	01312 - MAC B	J - E	Nevada
Noridian Healthcare Solutions, LLC	A and B MAC	01911 - MAC A	J - E	American Samoa California - Entire State Guam Hawaii Nevada Northern Mariana Islands

Article Information

General Information

Article ID

A57329

Original Effective Date

08/24/2020

Article Title

Billing and Coding: MoIDX: Predictive Classifiers for Early Stage Non-Small Cell Lung Cancer

Revision Effective Date

N/A

Article Type

Billing and Coding

Revision Ending Date

N/A

AMA CPT / ADA CDT / AHA NUBC Copyright Statement

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Retirement 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 documentation to process the claim.

CMS Internet-Only Manual, Publication 100-02, *Medicare Benefit Policy Manual*, Chapter 15, Section 80, Requirements for Diagnostic X-Ray, Diagnostic Laboratory, and Other Diagnostic Tests.

CMS Internet-Only Manual, Publication 100-04, *Medicare Claims Processing Manual*, Ch. 16, §50.5 Jurisdiction of Laboratory Claims, §60.1.2 Independent Laboratory Specimen Drawing, §60.2. Travel Allowance.

CMS Internet-Only Manual Publication 100-04, *Medicare Claims Processing Manual*, Chapter 23 Section 10 Reporting ICD Diagnosis and Procedure Codes.

Article Guidance

Article Text:

The following coding and billing guidance is to be used with its associated Local Coverage Determination.

Molecular classifiers are considered reasonable and necessary when beneficiaries meet all of the following criteria:

1. The patient has a non-squamous NSCLC with a tumor size < 5cm, and there are no positive lymph nodes (*i.e.* American Joint Committee on Cancer Eighth Edition Stages I and IIa),
2. The patient is sufficiently healthy to tolerate chemotherapy,
3. Adjuvant platinum-containing chemotherapy is being considered for the patient, and
4. The test is ordered by a physician who is treating the patient for NSCLC (generally a medical oncologist, surgeon, or radiation oncologist) to help in the decision of whether or not to recommend adjuvant chemotherapy.

To report a Razor Testing Service, please submit the following claim information:

- Use the CPT® code 81479
- Enter the appropriate Z-code
- Enter 1 unit of service (UOS)
- Select the appropriate ICD-10-CM code

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

N/A

Group 1 Codes:

CODE	DESCRIPTION
81479	UNLISTED MOLECULAR PATHOLOGY PROCEDURE

CPT/HCPCS Modifiers**Group 1 Paragraph:**

N/A

Group 1 Codes:

N/A

ICD-10 Codes that Support Medical Necessity**Group 1 Paragraph:**

N/A

Group 1 Codes:

ICD-10 CODE	DESCRIPTION
C34.01	Malignant neoplasm of right main bronchus
C34.02	Malignant neoplasm of left main bronchus
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung
C34.2	Malignant neoplasm of middle lobe, bronchus or lung
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung

Group 1 Medical Necessity ICD-10 Codes Asterisk Explanation:

N/A

ICD-10 Codes that DO NOT Support Medical Necessity**Group 1 Paragraph:**

N/A

Group 1 Codes:

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.

CODE	DESCRIPTION
999x	Not Applicable

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**Group 1 Paragraph:**

N/A

Group 1 Codes:

CODE
N/A

Revision History Information

N/A

Associated Documents

Related Local Coverage Document(s)

Article(s)

A58271 - Response to Comments: MoIDX: Predictive Classifiers for Early Stage Non-Small Cell Lung Cancer

LCD(s)

L38327 - MoIDX: Predictive Classifiers for Early Stage Non-Small Cell Lung Cancer

DL38327 - MoIDX: Razor 14-Gene Lung Cancer Assay

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)

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Keywords

N/A