Local Coverage Article:
Billing and Coding: MolDX: Genetic Testing for Hypercoagulability /Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR) (A57424)

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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<tr>
<th>CONTRACTOR NAME</th>
<th>CONTRACT TYPE</th>
<th>CONTRACT NUMBER</th>
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<th>STATE(S)</th>
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Specifications, contact Tim Carlson at (312) 893-6816 or Laryssa Marshall at (312) 893-6814. You may also contact us at ub04@healthforum.com.

**CMS National Coverage Policy**

Title XVIII of the Social Security Act (SSA), §1862(a)(1)(A), states that no Medicare payment shall be made for items or services that “are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.”

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

42 Code of Federal Regulations (CFR) §410.32 Diagnostic x-ray tests, diagnostic laboratory tests, and other diagnostic tests: Conditions.

CMS Internet Online Manual Pub. 100-02 (Medicare Benefit Policy Manual), Chapter 15, Section 80, “Requirements for Diagnostic X-Ray, Diagnostic Laboratory, and Other Diagnostic Tests”

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

CMS Internet Online Manual Pub. 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.

To report a Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR) service, please submit the following claim information:

- Select 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 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 claim form
- Select the appropriate ICD-10-CM code

**Coding Information**

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CPT/HCPCS Codes

Group 1 Paragraph:
N/A

Group 1 Codes:

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<tr>
<td>81240</td>
<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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<td>81291</td>
<td>MTHFR (5,10-METHYLENETETRAHYDROFOLATE REDUCTASE) (EG, HEREDITARY HYPERCOAGULABILITY) GENE ANALYSIS, COMMON VARIANTS (EG, 677T, 1298C)</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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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.
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)
A54894 - Response to Comments: MolDX: Genetic Testing for Hypercoagulability / Thrombophilia

LCD(s)
L36159 - MolDX: Genetic Testing for Hypercoagulability / Thrombophilia (Factor V Leiden, Factor II Prothrombin, and MTHFR)
DL36157
- (MCD Archive Site)DL36159
- (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
Keywords

- 81240
- 81241
- 81291
- Hypercoagulability
- Thrombophilia
- Factor V Leiden
- Factor II Prothrombin
- MTHFR
- genetic
- MolDx
- pregnant
- thrombophilia
- FVL
- G20210A