

Frequently Asked Questions Regarding 2010 CMS Reimbursement Changes For Rapid Diagnostic Drug Tests (Immunoassay Tests)

1) When did the new Centers for Medicare and Medicaid Services (CMS) codes take effect?

April 1, 2010. Please reference the following CMS website for complete details of the specific changes that have occurred: www.cms.gov

2) What was the overall change that was made?

In past years physicians were able to receive multiple reimbursements on multi-drug devices at the same rate per drug as single-drug devices. This led to a rather substantial increase in reimbursements paid out by CMS. To limit this practice CMS generated two new reimbursement codes that are specific to multi-drug tests and single-drug tests.

3) Can I receive multiple reimbursements for a multi-drug test device?

It depends on the patient's insurance:

- For Medicare/Medicaid - NO
You can only be reimbursed once. The current rate is \$20.83.
HCPCS code = G0430QW (CLIA-Waived) or G0430
- For Private Insurance Carriers - YES (currently)
You can continue to submit under the previous CPT code system. The reimbursement is per drug class NOT per drug as many seemed to believe. Examples of Drug Classes include: AMPHETAMINE (which includes Amphetamine, Methamphetamine, and Ecstasy/MDMA) or OPIATES (Morphine/Opiate and Oxycodone). Please refer to Question #8 for a complete chart. The average reimbursement is \$19.72 per drug class.
CPT code = 80101QW (CLIA-Waived) or 80101

4) How can I be reimbursed for single-drug test devices?

You must be using single devices such as the Alfa Single Dip Cassette. This means that there is only one drug strip per test device.

- Medicare/Medicaid - use the HCPCS code G0431QW (CLIA-Waived) or G0431 per drug class.
You can only be reimbursed once per single test device. The current rate is \$19.72.
- Private Insurance Carrier - use the current CPT code 80101QW (CLIA-Waived) or 80101 per drug class
You can only be reimbursed once per single test device. The current rate is \$19.72.

5) Why do some codes use QW?

This is a modifier to indicate CLIA-Waived. If a CLIA approved facility or physician is using a CLIA-Waived test they must indicate it on the code being used for reimbursement purposes. These physicians must have either one of the following to qualify for CLIA status:

- COW - CLIA Certificate of Waiver
- COA - CLIA Certificate of Accreditation

6) What does HCPCS stand for?

Healthcare Common Procedure Coding System

7) What does CPT mean?
Current Procedural Terminology

8) What drugs fall under what drug CLASSES?

AMPHETAMINES

- Amphetamines (AMP)
- Methamphetamines (MET or mAMP)
- Ecstasy (XTC or MDMA)

BARBITURATES

- Barbiturates (BAR)

BENZODIAZEPINES

- Benzodiazepine (BZD or BZO)

BUPRENORPHINE

- Buprenorphine (BUP)

COCAINE

- Cocaine (COC)

METHADONE

- Methadone (MTD)

OPIATES

- Morphine/Opiate (MOR, MOR/OPI or OPI)
- Oxycodone (OXY)

PHENCYCLIDINE

- Phencyclidine (PCP)

PROPOXYPHENE

- Propoxyphene (PPX)

MARIJUANA

- Marijuana (THC)

TRICYCLIC ANTIDEPRESSANT

- Tricyclic Antidepressant (TCA)

9) Where can I find out more information about the CMS reimbursement changes or apply for a CLIA certificate? www.cms.gov

10) What does Alfa offer to meet my CLIA-Waived needs?

Part #	Description	Cut Off Level
Single-Drug Test Devices		
03-3012QW	AMP DIP CASSETTE	1000 ng/mL
03-3152QW	BAR DIP CASSETTE	200 ng/mL
03-3132QW	BZD DIP CASSETTE	300 ng/mL
03-3052QW	COC DIP CASSETTE	300 ng/mL
03-3032QW	MET DIP CASSETTE	1000 ng/mL
03-3092QW	OPI/MOR DIP CASSETTE	2000 ng/mL
03-3172QW	MTD DIP CASSETTE	300 ng/mL
03-3112QW	PCP DIP CASSETTE	25 ng/mL
03-2972QW	TCA DIP CASSETTE	1000 ng/mL
03-3072QW	THC DIP CASSETTE	50 ng/mL
03-2952QW	XTC (MDMA) DIP CASSETTE	500 ng/mL
Multi-Drug Test Devices		
03-3940QW	11 PANEL DIP CARD (AMP, BAR, BZD, COC, MET, MOR/OPI, PC, TCA, THC, XTC)	See Above
Many other configurations also available. Contact Customer Service for more details.		

DISCLAIMER: These FAQs are our summary and interpretation only of the CMS materials currently available. Under no circumstances does Alfa guarantee reimbursement by private insurance carriers or Medicare/Medicaid. Always refer to CMS or your relevant insurance carrier for up-to-date and state by state reimbursement information.

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