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# CMS Manual System

## Pub. 100-04 Medicare Claims Processing

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Department of Health &  
Human Services (DHHS)  
Centers for Medicare &  
Medicaid Services (CMS)

Transmittal 69

Date: JANUARY 23, 2004

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CHANGE REQUEST 2906

**I. SUMMARY OF CHANGES:** This business requirement revises the criteria for using the CB modifier. Submitters no longer have to validate that the ESRD beneficiary is in a SNF Part A stay.

**NEW/REVISED MATERIAL - EFFECTIVE DATE:** April 1, 2003

**\*IMPLEMENTATION DATE:** February 23, 2004

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged.*

### II. CHANGES IN MANUAL INSTRUCTIONS:

(R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
R	Chapter 16 Table of Contents
N	16/40.6.2.3 Skilled Nursing Facility (SNF) Consolidated Billing (CB) Editing and Separately Billed ESRD Laboratory Test Furnished to Patients of Independent Dialysis Facilities

### \*III. FUNDING:

These instructions should be implemented within your current operating budget.

### IV. ATTACHMENTS:

X	Business Requirements
X	Manual Instruction
	Confidential Requirements
	One-Time Notification

\*Medicare contractors only

# Attachment - Business Requirements

Pub. 100-04	Transmittal: 69	Date: January 23, 2004	Change Request 2906
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**SUBJECT: Criteria for Using the CB Modifier**

## **I. GENERAL INFORMATION**

### **A. Background:**

The purpose of this business requirement (BR) is to address two specific areas of concern related to CR 2475 Transmittal AB-02-175.

#### **Issue/Concern #1:**

Providers/suppliers often times cannot ascertain from the dialysis facility or the laboratory order that the End Stage Renal Disease (ESRD) Beneficiary is in a Skilled Nursing Facility (SNF) Part A stay. Transmittal AB-092-175 requires that with respect to the “CB” modifier “the provider or supplier may use the modifier only when it has determined that: (a) the beneficiary has ESRD entitlement, (b) the test is related to the dialysis treatment for ESRD, (c) the test is ordered by a dialysis facility, (d) the test is not included in the dialysis facility’s composite rate payment and (e) the beneficiary is in a SNF Part A stay.”

#### **Issue/Concern #2:**

Providers/suppliers need a listing of diagnostic test that are considered ESRD-related in submitting claims for services with the “CB” modifier. Transmittal AB-02-175 did not define specific diagnostic test as ESRD-related.

#### **CMS Response to the Concerns:**

The guidance issued on submission of the “CB” modifier is being modified to no longer require that the provider/supplier determine that the beneficiary is in a SNF Part A stay.

The diagnostic test considered ESRD-related are identified (see attachment).

### **B. Policy:**

A provider or supplier may use the “CB” modifier only when it has determined that (a) the beneficiary has ESRD entitlement, (b) the test is related to the dialysis treatment for ESRD, (c) the test is ordered by a doctor providing care to patients in the dialysis facility, and (d) the test is not included in the dialysis facility’s composite rate payment.

CMS has identified the diagnostic services (see attachment) as being commonly furnished to ESRD beneficiaries and payable outside the composite rate. When billed using the “CB” modifier, these services will bypass our SNF CB edits.

Attachment 1 was not designed as an all-inclusive list of Medicare covered diagnostic services. Additional diagnostic services related to the beneficiary’s ESRD treatment/care may be considered ESRD-related. Any diagnostic services related to the beneficiary’s ESRD treatment/care must be submitted using the “CB” modifier, however, if these services are not listed in Attachment 1, the carrier may require supporting medical documentation.

In addition, beneficiaries in a SNF Part A stay are eligible for a broad range of diagnostic services as part of the SNF Part A benefit. Physicians ordering medically necessary diagnostic test that are not directly related to the beneficiary’s ESRD dialysis treatment are subject to the SNF consolidated billing requirements. Physicians may bill the carrier for the professional component of these diagnostic tests. In most cases, however, the technical component of diagnostic tests is included in the SNF PPS rate, and is not separately billable to the carrier. Physicians should coordinate with the SNF in ordering such tests since the SNF will be responsible for reimbursing for the technical component.

**C. Provider Education:** Carriers and Intermediaries shall inform affected providers by posting either a summary or relevant portions of this document on their Web site within two weeks. Also, carriers and intermediaries shall publish this same information in their next regularly scheduled bulletin. If they have a listserv that targets affected providers, they shall use it to notify subscribers that information about Submission of the CB Modifier and CMS Identification of Diagnostic Services Considered Dialysis Related is available on their Web site.

**II. BUSINESS REQUIREMENTS**

*“Shall” denotes a mandatory requirement*  
*“Should” denotes an optional requirement*

<b>Requirement #</b>	<b>Requirements</b>	<b>Responsibility</b>
2906.1	Carriers and Intermediaries shall publish the information contained in this business requirement on their web site within two weeks.	Carriers/Intermediaries
2906.2	Carriers and Intermediaries should use Attachment 1 as a guide in processing claims submitted with the “CB” modifier.	Carriers/Intermediaries

**III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS**

**A. Other Instructions:**

<b>X-Ref Requirement #</b>	<b>Instructions</b>
N/A	

**B. Design Considerations:**

<b>X-Ref Requirement #</b>	<b>Recommendation for Medicare System Requirements</b>
N/A	

**C. Interfaces:** N/A

**D. Contractor Financial Reporting /Workload Impact:** N/A

**E. Dependencies:** N/A

**F. Testing Considerations:** N/A

**IV. SCHEDULE, CONTACTS, AND FUNDING**

<b>Effective Date: April 1, 2003</b> <b>Implementation Date: February 23, 2004</b> <b>Pre-Implementation Contact(s): Joan Proctor-Young (410) 786-0949</b> <b>Post-Implementation Contact(s): Regional Office</b>	<b>These instructions should be implemented within your current operating budget</b>
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**Attachment**

# Medicare Claims Processing Manual

## Chapter 16 - Laboratory Services

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### Table of Contents

*(Rev. 69, 01-23-04)*

#### [Crosswalk to Old Manuals](#)

10 - Background

10.1 - Definitions

10.2 - General Explanation of Payment

20 - Calculation of Payment Rates - Clinical Laboratory Test Fee Schedules

20.1 - Initial Development of Laboratory Fee Schedules

20.2 - Annual Fee Schedule Updates

30 - Special Payment Considerations

30.1 - Mandatory Assignment for Laboratory Tests

30.1.1 - Rural Health Clinics

30.2 - Deductible and Coinsurance Application for Laboratory Tests

30.3 - Method of Payment for Clinical Laboratory Tests - Place of Service Variation

30.4 - Payment for Review of Laboratory Test Results by Physician

40 - Billing for Clinical Laboratory Tests

40.1 - Laboratories Billing for Referred Tests

40.2 - Payment Limit for Purchased Services

40.3 - Hospital Billing Under Part B

40.3.1 - Critical Access Hospital (CAH) Outpatient Laboratory Service

40.4 - Special Skilled Nursing Facility (SNF) Billing Exceptions for Laboratory Tests

40.4.1 - Which Contractor to Bill for Laboratory Services Furnished to a Medicare Beneficiary in a Skilled Nursing Facility (SNF)

40.5 - Rural Health Clinic (RHC) Billing

40.6 - Billing for End Stage Renal Disease (ESRD) Related Laboratory Tests

40.6.1 – Automated Multi-Channel Chemistry (AMCC) Tests for ESRD Beneficiaries - FIs

40.6.2 - Claims Processing for Separately Billable Tests for ESRD Beneficiaries

40.6.2.1 - Separately Billable ESRD Laboratory Tests Furnished by Hospital-Based Facilities

40.6.2.2 - Separately Billable ESRD Laboratory Tests Furnished to Patients of Independent Dialysis Facilities - FIs

*40.6.2.3 - Skilled Nursing Facility (SNF) Consolidated Billing (CB) and Separately Billable ESRD Laboratory Tests Furnished to Patients of Independent Dialysis Facilities*

40.7 - Billing for Noncovered Clinical Laboratory Tests

50 – Carrier Claims Processing

50.1 - Referring Laboratories

50.2 - Physicians

50.2.1 - Assignment Required

50.3 - Hospitals

50.3.1 - Hospital-Leased Laboratories

50.3.2 - Hospital Laboratory Services Furnished to Nonhospital Patients

50.4 - Reporting of Pricing Localities for Clinical Laboratory Services

50.5 - Jurisdiction of Laboratory Claims

50.5.1 - Referral Laboratory Services

50.5.2 - Examples of Independent Laboratory Jurisdiction

60 - Specimen Collection Fee and Travel Allowance

60.1 - Specimen Collection Fee

60.1.1 - Physician Specimen Drawing

60.1.2 - Independent Laboratory Specimen Drawing

60.1.3 - Specimen Drawing for Dialysis Patients

60.1.4 - Coding Requirements for Specimen Collection

60.2 - Travel Allowance

70 - Clinical Laboratory Improvement Amendments (CLIA) Requirements

70.1 - Background

70.2 - Billing

70.3 - Verifying CLIA Certification

70.4 - CLIA Numbers

70.5 - CLIA Categories and Subcategories

- 70.6 - Certificate for Physician-Performed Microscopy Procedures
- 70.7 - Deleted - Held for Expansion
- 70.8 - Certificate of Waiver
- 70.9 - CLIA License or Licensure Exemption
- 70.10 - CLIA Number Submitted on Form CMS-1500
  - 70.10.1 - Physician Notification of Denials
- 70.11 - Reasons for Denial - Physician Office Laboratories Out-of-Compliance
- 80 - Issues Related to Specific Tests
  - 80.1 - Screening Services
  - 80.2 - Anatomic Pathology Services
    - 80.2.1 - Technical Component (TC) of Physician Pathology Services to Hospital Patients
  - 80.3 - National Minimum Payment Amounts for Cervical or Vaginal Smear Clinical Laboratory Tests
  - 80.4 - Oximetry
- 90 - Automated Profile Tests and Organ/Disease Oriented Panels
  - 90.1 - Laboratory Tests Utilizing Automated Equipment
    - 90.1.1 - Automated Test Listing
  - 90.2 - Organ or Disease Oriented Panels
  - 90.3 - Claims Processing Requirements for Panel and Profile Tests
    - 90.3.1 - History Display
    - 90.3.2 - Medicare Secondary Payer
  - 90.4 - Evaluating the Medical Necessity for Laboratory Panel CPT Codes
  - 90.5 - Special Processing Considerations
- 100 - CPT Codes Subject to and Not Subject to the Clinical Laboratory Fee Schedule
  - 100.1 - Deleted - Held for Expansion
  - 100.2 - Laboratory Tests Never Subject to the Fee Schedule
  - 100.3 - Procedures Not Subject to Fee Schedule When Billed With Blood Products
  - 100.4 - Not Otherwise Classified Clinical Laboratory Tests
  - 100.5 - Other Coding Issues
    - 100.5.1 - Tests Performed More Than Once on the Same Day
  - 100.6 - Pricing Modifiers
- 110 - Coordination Between Carriers and Other Entities

110.1 - Coordination Between Carriers and FIs/RRB

110.2 - Coordination With Medicaid

110.3 - Coordination With FIs and Providers

110.4 - Carrier Contacts With Independent Clinical Laboratories

120- Clinical Laboratory Services Based on the Negotiated Rulemaking

120.1 - Negotiated Rulemaking Implementation



**40.6.2.3 – Skilled Nursing Facility (SNF) Consolidated Billing (CB) Editing and Separately Billed ESRD Laboratory Test Furnished to Patients of Independent Dialysis Facilities – Carriers**

**(Rev. 69, 01-23-04)**

*Effective April 1, 2003, for DOS on or after April 1, 2001, CWF will not apply the SNF CB edits to line items that contain the CB modifier. A provider or supplier may use the “CB” modifier only when it has determined that: (a) the beneficiary has ESRD entitlement, (b) the test is related to the dialysis treatment for ESRD, (c) the test is ordered by a doctor providing care to patients in the dialysis facility, and (d) the test is not included in the dialysis facility’s composite rate payment.*

*Those diagnostic tests that are presumptively considered to be dialysis-related and, therefore, appropriate for submission with the “CB” modifier are identified in Exhibit 3. This list was not designed as an all-inclusive list of Medicare covered diagnostic services. Additional diagnostic services related to the beneficiary’s ESRD treatment/care may be considered dialysis-related.. However, if these services are not included in our listing, the carrier may require supporting medical documentation.*

*Beneficiaries in a SNF Part A stay are eligible for a broad range of diagnostic services as part of the SNF Part A benefit. Physicians ordering medically necessary diagnostic test that are not directly related to the beneficiary’s ESRD are subject to the SNF consolidated billing requirements. Physicians may bill the carrier for the professional component of these diagnostic tests. In most cases, however, the technical component of diagnostic tests is included in the SNF PPS rate and is not separately billable to the carrier. Physicians should coordinate with the SNF in ordering such tests since the SNF will be responsible for bearing the cost of the technical component.*

This list only applies to SNF Consolidated Billing

71010	Chest x-ray
71015	Chest x-ray
71020	Chest x-ray
71021	Chest x-ray
71022	Chest x-ray
71030	Chest x-ray
71035	Chest x-ray
73120	X-ray hand
75710	Artery x-rays, arm/leg
75716	Artery x-rays, arm/leg
75774	Artery x-rays, arms/legs
75790	Artery x-ray, each vessel
75820	Visualize A-V shunt
75822	Vein x-ray, arm/leg
75893	Vein x-ray, arms/legs
75894	Transcath therapy, embolization
75896	X-rays, transcath therapy
75898	X-rays, transcath therapy
75901	Mechanical removal of pericath obstructive material
75902	Mechanical removal of intraluminal obstructive material
75961	Transcath retrieval of intravascular foreign body
75962	Transcath balloon angioplasty
75964	Transcath balloon angioplasty, each additional
76070	Computed tomography, bone mineral density study, axial
76075	Dual energy DEXA, bone density study, axial
76080	Radiologic exam, abscess, fistula or sinus tract study
76092	Screening mammography bilateral
76778	Ultrasound, transplanted kidney
78070	Parathyroid nuclear imaging
78351	Bone density, dual photon absorptionmetry
80048	Basic metabolic panel
80051	Electrolyte panel
80053	Comprehensive Metabolic Panel
? 80061	Lipid panel
80069	Renal function panel
80074	Acute hepatitis panel
80076	Hepatic function panel
80197	Tacrolimus
80410	Calcitonin stim panel
81000	Urinalysis with microscopy
81001	Urinalysis, auto w/scope
81002	Urinalysis nonauto w/o scope
81003	Urinalysis, auto, w/o scope

81005 Urinalysis, qual or semi-quant  
81007 Urine screen for bacteria, except by culture or dipstick  
81015 Microscopic exam of urine  
82009 Test for acetone/ketones, qual  
82010 Acetone assay, quant  
82017 Acylcarnitines, quant  
82040 serum albumin  
82042 albumin, urine quant or other source  
82108 Assay of aluminum  
82232 Beta2microglobulin (monitor large molecular weight solute clearance by dial  
82247 Bilirubin, total  
82248 Bilirubin, direct  
82306 Assay of vitamin D-3 (calcifediol)  
82307 Assay of vitamin D (calciferol)  
82308 Assay of calcitonin  
82310 Assay of calcium  
82330 Assay of calcium, ionized  
82374 Bicarbonate (CO<sub>2</sub>)  
82379 Assay of carnitine  
82435 Chloride blood (needed to determine acid/base status)  
82465 cholesterol, total serum  
82550 CPK, total  
82565 Assay of creatinine  
82570 Assay of urine creatinine  
82575 urine creatinine clearance test  
82607 Vit B12  
82728 ferritin  
82746 serum folate  
82747 RBC folate  
82800 Blood Gases, pH only  
82803 Blood gases: pH, pO<sub>2</sub> & pCO<sub>2</sub>  
82805 Blood gases W/O<sub>2</sub> saturation  
82810 Blood gases, O<sub>2</sub> sat only  
82945 Glucose other fluid  
82947 Assay, glucose, blood quant  
82948 Reagent strip/blood glucose  
83540 Assay of iron  
83550 Iron binding test  
83735 magnesium (monitored to avoid hypermagnesium)  
83937 Osteocalcin  
83970 parathormone (PTH)  
83986 Assay of body fluid acidity  
84075 alkaline phosphatase  
84100 Assay of phosphorus, inorganic  
84105 urine phosphorus  
84132 Assay of serum potassium  
84133 urine potassium  
84134 Assay of prealbumin  
84155 Assay of protein  
84160 serum protein by refractometry  
84295 Assay of serum sodium

84315	Body fluid specific gravity
84450	Transferase (AST) (SGOT)
84460	Alanine amino (ALT) (SGPT)
84466	transferrin
84520	Urea nitrogen, quantitative
84540	Assay of urine/urea-n
84545	Urea-N clearance test
84630	zinc
85002	Bleeding time test
85004	Automated diff wbc count
85007	BI smear w/diff wbc count
85008	BI smear w/o diff wbc count
85009	Manual diff wbc count b-coat
85013	Spun microhematocrit
85014	Hematocrit
85018	Hemoglobin
85025	Complete CBC w/auto diff wbc
85027	Complete CBC, automated
85032	Manual cell count, each
85041	Automated RBC count
85044	Manual reticulocyte count
85045	Automated reticulocyte count
85046	Reticyte/hgb concentrate
85048	Automated leukocyte count
85049	Automated platelet count
85345	Coagulation time, Lee-White
85347	Coagulation time, activated
85348	Coagulation time, other methods
85520	Heparin assay
85610	Prothrombin time
85611	Prothrombin test,substitution
85651	sed rate
85652	automates sed rate
85730	thromboplastin time, partial (PTT)
85732	Thromboplastin time, partial, substitution
86590	Streptokinase, antibody
86644	CMV screen
86645	Cytomegalovirus antibody dfa (IgM)
86687	HTLV-I antibody
86688	HTLV-II antibody
86689	HTLV/HIV confirmatory test
86692	Hepatitis, delta agent
86701	HIV-1
86702	HIV-2
86703	HIV-1/HIV2, single assay
86704	Hep B core antibody, total
86705	Hep b core antibody, IgM
86706	Hep B surface antibody
86707	Hep Be antibody
86709	Hep A, IgM antibody
86803	Hepatitis C ab test
86804	Hep C ab test, confirm

86812	HLA typing, A, B, or C
86813	HLA typing, A, B, or C, multiple antigens
86816	HLA typing, DR/DQ
86817	HLA typing, DR/DQ, multiple antigens
86900	Blood typing, ABO
86901	Rh typing
86903	Blood typing, antigen screen
86904	Blood typing, patient serum
86905	Blood typing, RBC antigens
86906	Blood typing, Rh phenotype
87040	culture, blood
87070	Culture, bacteria, other
87071	Culture bacteri aerobic other, quant
87073	Culture bacteria anaerobic, quant
87075	Culture bacteria anaerobic, any source w/ID
87076	Culture anaerobe ident, each
87077	Culture aerobic identify
87081	Culture screen only
87084	Culture w/ colony estimation
87086	Urine culture/quant colony count
87088	Urine bacteria culture, isolation & ID
87181	Microbe susceptible, diffuse
87184	Microbe susceptible, disk
87185	Microbe susceptible, enzyme
87186	Microbe susceptible, mic
87187	Microbe susceptible, mlc
87188	Microbe suscept, macrobroth
87190	Microbe suscept, mycobacteri
87197	Bactericidal level, serum
87205	Smear, gram stain
87271	CMV, DFA
87340	HepB surface antigen
87341	HepatitisB surface, ag, eia, neutralization
87350	HepatitisBe ag, eia
87380	Hepatitis delta ag, eia
87390	HIV-1 ag, eia
87391	HIV-2 ag, eia
87515	Hepatitis B, DNA, dir probe
87516	Hepatitis B, DNA, amp probe
87517	Hepatitis B, DNA, quant
87520	Hepatitis C, RNA, dir probe
87521	Hepatitis C, RNA, amp probe
87522	Hepatitis C, RN A, quant
87525	Hepatitis G, DNA, dir probe
87526	Hepatitis G, DNA, amp probe
87527	Hepatitis G, DNA, quant
89050	cell count, peritoneal fluid (no diff)
89051	cell count, peritoneal fluid with diff
93000	Echo exam of heart
93005	Electrocardiogram, tracing
93010	Electrocardiogram report
93040	Rhythm ECG with report

93041	Rhythm ECG, tracing
93042	Rhythm ECG with report
93307	Echo exam of heart
93308	Echo exam of heart, follow-up
93922	Extremity study
93923	Extremity study, multiple levels
93925	Lower extremity study - arterial
93926	Lower extremity study, limited- arterial
93930	Upper extremity study- arterial
93931	Upper extremity study, limited-arterial
93965	Extremity study-venous
93970	Extremity study-venous
93971	Extremity study, limited-venous
G0001	Routine venipuncture
G0202	Screening mammography, digital



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