

North Carolina Medicaid Special Bulletin

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Division of Medical Assistance

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**Attention:
All Providers**

Urine Drug Screening

*Providers are responsible for informing their billing agency of information in this bulletin.
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As noted in the March 2016 Special Medicaid Bulletin, [Changes to Drug Screening and Testing Codes](#), N.C. Division of Medical Assistance (DMA) is in the process of adding seven new HCPCS urine drug screening codes into the NCTracks system. The new codes are now loaded in NCTracks with an effective date of Jan. 1, 2016. **Providers may now bill for these services, however, until all necessary system changes are complete, claims submitted with new codes G0477-G0483 will pend for “no fee on file”.** These pended claims will recycle and pay when the system work is completed. DMA and CSRA are working to project the completion of these changes. No additional action will be required by providers to ensure that claims process and pay correctly after the system work is completed. This process also will be applicable to the Medicare crossover claims.

DMA will continue to reimburse claims for urine drug screening using CPT codes through June 30, 2016 at which time the following 64 codes will be end-dated: 80300, 80301, 80302, 80303, 80304, 80320, 80321, 80322, 80323, 80324, 80325, 80326, 80327, 80328, 80329, 80330, 80331, 80332, 80333, 80334, 80335, 80336, 80337, 80338, 80339, 80340, 80341, 80342, 80343, 80344, 80345, 80346, 80347, 80348, 80349, 80350, 80351, 80352, 80353, 80354, 80355, 80356, 80357, 80358, 80359, 80360, 80361, 80362, 80363, 80364, 80365, 83992, 80366, 80367, 80368, 80369, 80370, 80371, 80372, 80373, 80374, 80375, 80376, and 80377.

Providers must choose the code set to use that best describes the service that was rendered.

Note: Claims will deny if both HCPCS and CPT codes are billed for the same beneficiary and date of service.

Presumptive Testing – Only one (1) of the following tests may be billed per day with a maximum of **twenty (20)** tests per state fiscal year (July 1 - June 30) per beneficiary. Sample validity is included in the procedure code and is not separately reimbursable unless the provider rendering both tests is testing the urine for a medical reason other than validity of human urine. Documentation will need to be submitted with the claim demonstrating medical necessity for the additional testing.

- G0477 - Drug test(s), presumptive, any number of drug classes; any number of devices or procedures, (e.g., immunoassay) capable of being read by direct optical observation only (e.g., dipsticks, cups, cards, cartridges), includes sample validation when performed, per date of service.
- G0478 - Drug test(s), presumptive, any number of drug classes; any number of devices or procedures, (e.g., immunoassay) read by instrument-assisted direct optical observation (e.g., dipsticks, cups, cards, cartridges), includes sample validation when performed, per date of service.
- G0479 - Drug test(s), presumptive, any number of drug classes; any number of devices or procedures by instrumented chemistry analyzers utilizing immunoassay, enzyme assay, TOF, MALDI, LTD, DESI, DART, GHPC, GC mass spectrometry), includes sample validation when performed, per date of service.

Definitive Testing - Only one (1) of the following tests may be billed per day, per beneficiary. Sample validity is included in the procedure code and is not separately reimbursable unless the provider rendering both tests is testing the urine for a medical reason other than validity of human urine. Documentation will need to be submitted with the claim demonstrating medical necessity for the additional testing. Definitive drug testing must **only** be performed in the presence of an unanticipated result on a presumptive drug screen, and only for the drug class(es) that produced the unanticipated result. The only exception that will be made is if there is no commercially available product to test for the presence of a specific substance. Documentation to support performing the definitive test including the unavailability of a presumptive test will need to be submitted with the claim. For codes G0481, G0482, and G0483, the presumptive drug screen result will need to be submitted with the claim demonstrating that the number of drug classes producing an unanticipated result match the definition of the definitive test performed.

- G0480 - Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (e.g., IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (e.g., alcohol dehydrogenase)); qualitative or quantitative, all sources(s), includes specimen validity testing, per day, 1-7 drug class(es), including metabolite(s) if performed.
- G0481 - Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (e.g., IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (e.g., alcohol dehydrogenase)); qualitative or quantitative, all sources(s), includes specimen validity testing, per day, 8-14 drug class(es), including metabolite(s) if performed.
- G0482 - Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (e.g., IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (e.g., alcohol dehydrogenase)); qualitative or quantitative, all sources(s), includes specimen validity testing, per day, 15-21 drug class(es), including metabolite(s) if performed.
- G0483 - Drug test(s), definitive, utilizing drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (e.g., IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (e.g., alcohol dehydrogenase)); qualitative or quantitative, all sources(s), includes specimen validity testing, per day, 22 or more drug class(es), including metabolite(s) if performed.

DMA will issue additional information regarding implementation and reimbursement of G0477-G0483 as it becomes available.

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