



MEDICARE COVERAGE UPDATE

Dear Client,

Novitas Medicare revised their Limited Coverage Decision (LCD) for Qualitative and Quantitative Drug Testing, effective 1/1/2017.

The full Controlled Substance Monitoring and Drugs of Abuse Testing Policy (L35006) can be found at: <http://www.novitas-solutions.com/> . Alternatively, Drugscan can provide you with a copy of the 1/1/2017 Medicare LCD.

Should you have questions regarding this communication please contact the Drugscan Billing Department at 844.345.1821.

Please note that Drugscan does not and cannot provide guidance or direction on our referring physicians' internal billing or reimbursement practices. Only the physician can determine the specific diagnosis(es) code(s) that are applicable to a specific patient on a specific date of service, and Drugscan must rely on the physician to provide the appropriate diagnosis(es) code(s).

For informational and reference purposes only, attached are the most common ICD-10 codes submitted to Drugscan.

Sincerely,

Drugscan, Inc.

Most Common Toxicology ICD-10 Codes submitted to Drugscan sorted by Covered ICD-10 Codes:

ICD-10 DX Code	ICD-10 Description	Medicare Covered for Screens	Medicare Covered for Confirms
M54.2	CERVICALGIA	YES	YES
M79.7	FIBROMYALGIA	YES	YES
M51.16	INTERVERTEBRAL DISC DISORDERS WITH RADICULOPATHY,	YES	YES
Z79.891	LONG TERM (CURRENT) USE OF OPIATE ANALGESIC	YES	YES
M54.5	LOW BACK PAIN	YES	YES
M79.1	MYALGIA	YES	YES
M79.2	NEURALGIA AND NEURITIS, UNSPECIFIED	YES	YES
F11.20	OPIOID DEPENDENCE, UNCOMPLICATED	YES	YES
M51.36	OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBAR REG	YES	YES
M51.37	OTHER INTERVERTEBRAL DISC DEGENERATION, LUMBOSACRA	YES	YES
Z79.899	OTHER LONG TERM (CURRENT) DRUG THERAPY	YES	YES
F19.20	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE, UNCOMPLIC	YES	YES
M54.16	RADICULOPATHY, LUMBAR REGION	YES	YES
M54.17	RADICULOPATHY, LUMBOSACRAL REGION	YES	YES
M47.812	SPONDYLOSIS WITHOUT MYELOPATHY OR RADICULOPATHY, C	YES	YES
M47.817	SPONDYLOSIS WITHOUT MYELOPATHY OR RADICULOPATHY, L	YES	YES
M47.816	SPONDYLOSIS WITHOUT MYELOPATHY OR RADICULOPATHY, L	YES	YES
F10.20	ALCOHOL DEPENDENCE, UNCOMPLICATED	NO	YES
F12.20	CANNABIS DEPENDENCE, UNCOMPLICATED	NO	YES
F14.20	COCAINE DEPENDENCE, UNCOMPLICATED	NO	YES
F11.21	OPIOID DEPENDENCE, IN REMISSION	NO	YES
F15.20	OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	NO	YES
F13.20	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE, UNCOM	NO	YES
F10.10	ALCOHOL ABUSE, UNCOMPLICATED	NO	NO
F41.9	ANXIETY DISORDER, UNSPECIFIED	NO	NO
F90.0	ATTENTION-DEFICIT HYPERACTIVITY DISORDER, PREDOMIN	NO	NO
F90.9	ATTENTION-DEFICIT HYPERACTIVITY DISORDER, UNSPECIF	NO	NO
F12.10	CANNABIS ABUSE, UNCOMPLICATED	NO	NO
G89.4	CHRONIC PAIN SYNDROME	NO	NO
M54.9	DORSALGIA, UNSPECIFIED	NO	NO
Z51.89	ENCOUNTER FOR OTHER SPECIFIED AFTERCARE	NO	NO
Z51.81	ENCOUNTER FOR THERAPEUTIC DRUG LEVEL MONITORING	NO	NO
F41.1	GENERALIZED ANXIETY DISORDER	NO	NO
G47.00	INSOMNIA, UNSPECIFIED	NO	NO
F11.10	OPIOID ABUSE, UNCOMPLICATED	NO	NO
M50.30	OTHER CERVICAL DISC DEGENERATION, UNSPECIFIED CERV	NO	NO
M50.20	OTHER CERVICAL DISC DISPLACEMENT, UNSPECIFIED CERV	NO	NO
G89.29	OTHER CHRONIC PAIN	NO	NO
M51.26	OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBAR REG	NO	NO
M51.27	OTHER INTERVERTEBRAL DISC DISPLACEMENT, LUMBOSACRA	NO	NO
M25.562	PAIN IN LEFT KNEE	NO	NO
M25.512	PAIN IN LEFT SHOULDER	NO	NO
M25.561	PAIN IN RIGHT KNEE	NO	NO
M25.511	PAIN IN RIGHT SHOULDER	NO	NO
M54.6	PAIN IN THORACIC SPINE	NO	NO
M25.569	PAIN IN UNSPECIFIED KNEE	NO	NO
M96.1	POSTLAMINECTOMY SYNDROME, NOT ELSEWHERE CLASSIFIED	NO	NO
M54.12	RADICULOPATHY, CERVICAL REGION	NO	NO
M46.1	SACROILIITIS, NOT ELSEWHERE CLASSIFIED	NO	NO
M48.06	SPINAL STENOSIS, LUMBAR REGION	NO	NO

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F12.20	CANNABIS DEPENDENCE, UNCOMPLICATED	NO	YES
M54.2	CERVICALGIA	YES	YES
G89.4	CHRONIC PAIN SYNDROME	NO	NO
F14.20	COCAINE DEPENDENCE, UNCOMPLICATED	NO	YES
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F11.21	OPIOID DEPENDENCE, IN REMISSION	NO	YES
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