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Des Moines Laboratory

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GI Panel by PCR – Utilization & Billing Questions

MercyOne Des Moines Laboratory has transitioned away from the stool culture to provide a larger array of pathogens with reduced turnaround times with use of the GI Panel by PCR. We'd like to take a moment to provide information around utilization and billing for this molecular test.

Current guidelines recommend that stool testing for enteric pathogens be reserved for patients with diarrhea plus fever, bloody or mucoid stools, severe abdominal pain, or signs of sepsis. The threshold for testing should be lower in immunocompromised patients with diarrhea. Testing may be indicated in the setting of a suspected outbreak even when the high-risk symptoms are not present. A recent study found utilizing the GI panel to test patients meeting the above criteria would reduce testing volume 32% while preserving pathogen detection (sensitivity 97%, NPV 99.5%) (citation: https://pubmed.ncbi.nlm.nih.gov/31041357/).

The expense of GI Panel by PCR can be significant, and national organizations tend to discourage overuse of panel testing; however, there are situations in which the GI Panel by PCR can be part of cost-effective care. For example, if available on-site at an emergency room location, and same-day results prevent unnecessary overnight admission or unnecessary invasive procedures, then the cost of the test is justifiable. I've also seen it play a role in identifying institution-wide infectious disease issues as in a Norovirus outbreak. Also, a provider may refrain from prescribing an antibiotic depending on results (ie. not administering unnecessary medication AND not contributing to the worldwide resistance problem).

Thank you for choosing MercyOne Des Moines Laboratory.

The most important thing to be aware of for this panel is the local coverage article (LCA) for the Iowa Medicare Contractor WPSIC. The LCA can be found here:

https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleid=58761&ver=31&

Specifically, the GI panel falls under Group 7. There is a place of service requirement:

Testing is billed according to 1 of the following:

(a) Places of service (POS) 19, 21, 22, 23,

Below are the definitions of the covered POS codes:

19-Off Campus-Outpatient Hospital: A portion of an off-campus hospital provider-based department which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization. (Effective January 1, 2016)

21-Inpatient Hospital: A facility, other than psychiatric, which primarily provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services by, or under, the supervision of physicians to patients admitted for a variety of medical conditions.

22-On Campus-Outpatient Hospital: A portion of a hospital's main campus which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization. (Description change effective January 1, 2016)

23-Emergency Room – Hospital: A portion of a hospital where emergency diagnosis and treatment of illness or injury is provided.

For those that do not meet the place of service requirements, two exceptions can apply. The first exception is based on the specialty of the ordering provider:

OR: (b) The test is ordered as follows (for healthcare POS other than those listed in (a)):

(1) For immune-competent beneficiaries, the test must be ordered by an Infectious Disease Specialist or Gastroenterologist who is diagnosing and treating the beneficiary. (2) For immune-compromised beneficiaries, the test must be ordered by a clinician specialist in 1 of the following: Infectious Diseases, Oncology, Transplant (for any panel), or Gastroenterologist who is diagnosing and treating the beneficiary. (3) Regarding (1) and (2), An exception may be made in geographic locations where the specialist(s) cannot be

reasonably reached by the beneficiary, and the ordering provider is located closer to the beneficiary's place of residence than the nearest specialist. We would generally expect that beneficiaries for whom the test is ordered under this exception to be living in rural locations, islands, or some other location where access to care is limited. (4) For testing in POS other than POS 19, 21, 22, or 23, to bill one of the Group 7 CPT codes, TWO ICD-10 codes are required-one from Group 7 and another from Group 2.

The important thing to note is the 2 diagnosis code requirement if you don't meet the POS requirement but do meet the ordering specialty requirement. If you do meet the POS requirement, the diagnosis codes are listed in Group 7 and "Diarrhea Only" cases are not included on the list.

Private payers may have different coverage requirements, however, most model their coverage of these panel codes after Medicare rules.

Please take time to review this policy, specifically the Group 7 coverage information and let us know if you have any questions.

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