



“Keeping Our Client Informed”
Questions or Comments
Call 651-232-3500

HML UPDATE

Spring 2017

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Panel Changes

Effective 04/17/2017, **Antibody Titer** (panel code: ABT LAB1255) performed at Innovative Blood Resources (formerly known as Memorial Blood Centers) will have a simplified report format. The titer reports will list the clinically relevant AHG IAT titer results as follows:

- Anti-E has a titer of 8 at IAT.
- Hospital reports anti-E which has a titer of 16 at IAT.

Clarification of NIL Result:

NIL is currently reported when the titer is **non-reactive**. Effective 04/17/2017 the result of the titer will be reported as **zero** instead of reporting the titer as NIL.

If a titer is not performed because the strength of the antibody is weak, the report will read:

- Antibody too weak to titer.

Panel Name: Antibody Titer

Panel Code: ABT

CPT Code: 86886

Collect: 2 Lavender (EDTA 4 mL) + 1 Red top 10mL

Submit: 2 Lavender (EDTA 4 mL) + 1 Red top 10mL unspun

Unacceptable: Specimen more than 72 hrs. old. Markedly hemolyzed specimen. Incompletely or incorrectly labeled specimen



NOTE: Antibody Titer is usually a reflex test done when a clinically significant antibody is identified in a prenatal specimen. If the titer is the initial order, an Antibody Screen and Antibody Identification (if indicated), will be performed first and charged separately. Also order an Antibody Screen (HSC/LAB2286) if Positive. Antibody ID will be charged separately. Titers will not be done on specimens that have no antibody detected.

Test Performed at: Innovative Blood Resources

List Price: \$105.00

Effective January 25, 2017 Mayo Medical Laboratories implemented updated reference ranges for Arginine Vasopressin (AVP).

Current Reference Value: Adults: <1.7 pg/mL. Reference values were determined on platelet-poor EDTA plasma from individuals fasting no longer than overnight.

New Reference Value: Adults: <4.3 pg/mL. Reference values were determined on platelet-poor EDTA plasma from individuals fasting no longer than overnight.

Panel Name: Arginine Vasopressin (AVP)

Panel Code: ADH

CPT Code: 84588

Collect: 2 lavender top tubes on ice

Submit: 2 mL of platelet free plasma FROZEN immediately in a separate tube.

Unacceptable: Specimen not received frozen, markedly hemolyzed specimen

Note: Patient must fast and thirst for 6 hours prior to collection. See the specimen collection section of this manual for preparation of platelet free plasma. Patient should not have received radioactive materials for 5-7 days.

Test Performed at: Mayo Medical Laboratories

Effective April 3, 2017 HealthEast Medical Laboratory created an orderable panel for Vitamin, C (Ascorbic Acid), Plasma.

Panel Name: Ascorbic Acid (Vitamin C)

Panel Code: LAB3092 (VITC)

CPT Code: 82180

Collect: Green Top Tube on Wet Ice<4hr

Submit: 1 mL Plasma FROZEN in amber tube (PROTECT FROM LIGHT). Immediately place specimen on wet ice. Maintain specimen on wet ice and process within 4 hours of draw. Centrifuge at 4C, aliquot plasma into amber vial to protect from light and freeze.

Unacceptable: Mildly hemolyzed specimen, not frozen, not protected from light.

Note: Patient fasting 13 hours. Testing of non-fasting specimens or the use of vitamin supplementation can result in elevated plasma vitamin concentrations. Reference values were established in patients who were fasting.

Test Performed at: Mayo Medical Laboratories

List Price: \$40.44

Panel Changes Con't.

Effective March 20, 2017 Mayo Medical Laboratories started performing testing of Bile Acids, Total and we will no longer be referring testing to ARUP.

Panel Name: Bile, Total

Panel Code: BIL (LAB693)

CPT Code: 82239

Collect: Red Top

Submit: 0.5 mL serum centrifuged and serum removed from cells within 2 hours of collection and REFRIGERATED.

Unacceptable: Markedly hemolyzed or icteric specimen.

Note: Patient fasting 8 hours. Acceptable to draw non-fasting when patient is pregnant and is being evaluated of cholestasis.

Test Performed at: Mayo Medical Laboratories

List Price: \$68.30

Effective March 28, 2017, Blood Cultures are being ordered through a new panel code and the results will have a new format.

In the past, blood cultures were ordered either under LAB462 or Panel Code-BC. An anaerobic and an aerobic culture were performed and the results were reported individually under each of these headings.

Panel Name: Culture, Blood

Panel Code: LAB3081

Specimen requirements, CPT coding and pricing will remain the same.

Here is an example of what the result format used to look like:

Culture, Blood

Culture, Blood Aerobic Bottle (Final result)			
Test:	Culture, Blood Aerobic Bottle	Status:	Final result
ID:	16J153MB0008	Collected:	6/1/2016 1:54 PM
Type:	Blood	Received:	6/1/2016 1:54 PM
Source:		Authorized by:	
Resulting Lab:	SJH		
Component		Result	Expected Value
Aerobic Blood Culture Bottle		No Growth	No Growth, No organisms seen, bottle returned to instrument, Specimen not received

Culture, Blood

Culture, Blood Anaerobic Bottle (Final result)			
Test:	Culture, Blood Anaerobic Bottle	Status:	Final result
ID:	16J153MB0017	Collected:	6/1/2016 2:36 PM
Type:	Blood	Received:	6/1/2016 2:36 PM
Source:		Authorized by:	Aalfa Family Medicine
Resulting Lab:	SJH		
Component		Result	Expected Value
Anaerobic Blood Culture Bottle		No Growth	No Growth, No organisms seen, bottle returned to instrument, Specimen not received

Lab: SJH

Resulting Labs

SJH

ST JOSEPH'S LABORATORY, 45 WEST 10TH ST., SAINT PAUL MN 55102

New Format:

Instead of having 2 separate tests, one for Aerobic Bottle and one for Anaerobic bottle - both of them are now resulted on one test for Culture, Blood. So now providers can see the 2 bottle results in the same field. Also – only ONE Culture, Blood Positive workup will be resulted (instead of 2).

No Growth:

TEST CULTURE, BLOOD (Final result)

Test:	TEST CULTURE, BLOOD	Status:	Final result
ID:	17J082MB0001	Collected:	3/23/2017 11:13 AM
Type:	Blood	Received:	3/23/2017 11:13 AM
Source:		Authorized by:	
Resulting Lab:	SJH		
Component		Result	Expected Value
Anaerobic Blood Culture Bottle		No Growth	No Growth, No organisms seen, bottle returned to instrument, Specimen not received
Aerobic Blood Culture Bottle		No Growth	No Growth, No organisms seen, bottle returned to instrument, Specimen not received

Lab: SJH

Resulting Labs

SJH	ST JOSEPH'S LABORATORY, 45 WEST 10TH ST., SAINT PAUL MN 55102
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Preliminary Report:

TEST CULTURE, BLOOD (Final result)

Test:	TEST CULTURE, BLOOD	Status:	Final result
ID:	17J082MB0002	Collected:	3/23/2017 11:31 AM
Type:	Blood	Received:	3/23/2017 11:31 AM
Source:		Authorized by:	
Resulting Lab:	SJH		
Component		Result	Expected Value
Anaerobic Blood Culture Bottle		Positive after less than 24 hours incubation (!!)	No Growth, No organisms seen, bottle returned to instrument, Specimen not received
Aerobic Blood Culture Bottle		Positive after less than 24 hours incubation (!!)	No Growth, No organisms seen, bottle returned to instrument, Specimen not received

Lab: SJH

Resulting Labs

SJH	ST JOSEPH'S LABORATORY, 45 WEST 10TH ST., SAINT PAUL MN 55102
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Panel Changes Con't.

Effective April 10, 2017 Mayo Medical Laboratories updated the Cold Agglutinin panel by no longer performing Cold Agglutinin Screening with reflex to titer. The updated panel methodology is titration.

Panel Name: Cold Agglutinin Titer

Panel Code: COA (LAB1182)

CPT Code: 86157

Collect: Plain Red Top Tube on warm pack

Submit: 4 mL serum REFRIGERATED.

Unacceptable: Specimen collected in an SST tube.

Note: Clot red top for 30 minutes at 37C. Centrifuge, remove serum ASAP. For Mycoplasma pneumoniae, order panel MYC (LAB656).

Test Performed at: Mayo Medical Laboratories

List Price: \$52.25

Effective April 12, 2017 Endomysial Antibodies (IgA) has a new titer reflex, EMA Titer (IgA) when appropriate at an additional charge of \$130.00 per Mayo Medical Laboratories.

Panel Name: Endomysial Antibodies (IgA)

Panel Code: EML (LAB774)

CPT Code: 86255

Collect: Red Top

Submit: 2 mL serum REFRIGERATED.

Unacceptable: Markedly hemolyzed, lipemic or icteric specimen.

Note: If Endomysial Antibodies (IgA) is positive or indeterminate, Endomysial Titer (IgA) (CPT 86256) will be performed at an additional charge.

Test Performed at: Mayo Medical Laboratory

Effective February 1, 2017 Fetal Lung Profile, L/S Ratio, Amniotic Fluid became obsolete due to the vendor no longer manufacturing reagents and supplies necessary to perform the assay. Recommended alternative testing is Lamellar Body Count, Amniotic Fluid.

Panel Name: Lamellar Body Count, Amniotic Fluid

Panel Code: LBC

CPT Code: 83664

Collect: Amniotic Fluid (tap only) in a Screw-Top Container

Submit: 6 mL amniotic fluid REFRIGERATED in a screw-top container. Do not centrifuge. Ship unprocessed amniotic fluid on wet ice. Specimen must arrive at Fairview U of M within 24 hours of collection.

Unacceptable: Clotted specimen or vaginal pool. Frozen or centrifuged. Gross hemolysis, meconium, or mucus contamination.

Note: A minimum of 0.5 mL amniotic fluid is required.

Test Performed at: Fairview University of Minnesota Medical Center

Panel Changes Con't.

Effective January 26, 2017 Mayo Medical Laboratories started referring Hepatitis Delta Virus Antibody testing to ARUP Laboratories. Specimen requirements have changed to submit frozen serum.

Panel Name: Hepatitis Delta Virus Antibody
Panel Code: HDV
CPT Code: 86692
Collect: Red Top
Submit: 1mL serum **FROZEN** in a separate aliquot tube.
List Price: \$71.00

If you have questions, please contact Jean Chavez at 651-232-4289.

Effective January 9, 2017, all Methotrexate samples are being sent to MedTox Laboratories.

Panel Name: Methotrexate (Mexate®)
Panel Code: MTX
CPT Code: 80299
Collect: 1 mL serum from a plain red top tube
Submit: 1 mL serum REFRIGERATED. PROTECT FROM LIGHT.
Unacceptable: Specimen collected in SST tube or not protected from light.
Note: Send STAT when ordered on oncology patient

If you have any questions, please contact Jean Chavez at 651-232-4289.

Effective March 20, 2017 panel Mycoplasma hominis PCR, **Blood** has been built as follows:

Panel Name: Mycoplasma hominis PCR, Blood
Panel Code: MHBRP (LAB3090)
CPT Code: 87798
Collect: Lavender Top Tube
Submit: 1 mL Whole Blood (Lavender Top) REFRIGERATED in original tube.
Test Performed at: Mayo Medical Laboratories
List Price: \$113.48

Effective March 20, 2017 whole blood and EDTA plasma is no longer be acceptable specimens for panel MHR, Mycoplasma hominis PCR.

Panel Name: Mycoplasma hominis PCR
Panel Code: MHR
CPT Code: 87798
Collect: Sterile Screw-Top Container

Submit: SWAB: Cervical, urethral, vaginal or wound. FLUID: 1-2mL in sterile screw top. Respiratory (neonate only <3 mos), reproductive, synovial. URINE: 10 mL in sterile screw top. Tissue 5 mm- placenta, products of conception, genitourinary, respiratory, wound REFRIGERATED.

Unacceptable: Cotton swab, wooden swab, gel swab, dry swab, whole blood or EDTA plasma.

Note: Specimen source is REQUIRED.

Test Performed at: Mayo Medical Laboratories

List Price: \$113.48

Effective May 1, 2017, Ova and Parasite, Sputum, has become an orderable test.

Panel Name: Ova and Parasite, Sputum (OPR)

Panel Code: OPR

CPT Code: 87209

Collect: Sputum in a clean screw-top container.

Submit: Sputum in a clean screw-top container, refrigerated.

Unacceptable: Less than 1 ml of sputum. Sputum in a preservative.

Note: See the specimen collection section of the manual for collection instructions.

Test Performed at: St. Joseph's Hospital

If you have any questions, please contact Sarah Mason at 651-232-4008.

Effective April 14, 2017, HealthEast Medical Labs can no longer perform reducing substances testing on urine or fecal specimens.

The manufacturer no longer makes this product.

If this testing is needed use the following instructions:

For urine:

Panel Name: Carbohydrate, Urine, Cascade

Panel Code: Misc. Test

CPT Code: 84377

Note: If indicated, Glucose (CPT 82945) and/or Galactose (CPT 82760) will be performed and charged.

Collect: 5 mL of urine (minimum 1 mL)

Submit: First morning specimen, preferable. Refrigerate

Unacceptable: None

Test Performed at: Mayo Medical Laboratories

For feces:

Panel Name: Reducing Substances, Feces

Panel Code: Misc. Test

CPT Code: 84376

Collect: 3 g loose, random stool (minimum 2 g)

Submit: Screw cap container. Freeze immediately.

Unacceptable: Specimens from timed collections (24, 48, 72 hours) or formed stool.

Test Performed at: Mayo Medical Laboratories

If you have any questions feel free to contact Craig Rousar, at 651-232-3002, or carousar@healtheast.org

Panel Changes Con't.

Effective February 7, 2017 Mayo Medical Laboratories started referring Sulfatide Autoantibody testing to Athena Diagnostics. Methodology will be Enzyme-Linked Immunosorbent Assay (ELISA).

Panel Name: Sulfatide Autoantibody
Panel Code: SUL
CPT Code: 83520x2
Collect: Red Top
Submit: 2 mL serum REFRIGERATED.
List Price: Remains the same

On Monday January 9, 2017, HealthEast Medical Laboratory (HML) started performing TB Gold testing "in-house".

The changes for our clients will be small. HML will be using the same test method as our referral lab.

- Specimen collection will remain the same.
- Ordering TB gold supplies will remain the same.
- Reporting format will change slightly, but the report will have a clear result with an accompanying interpretation.

Panel Name: Quantiferon TB Gold
Panel Code: TBG
CPT Code: 86480
Collect: 1) Collect 3 TBQ tubes. 1 mL per tube. Fill to line on each tube. 2) Gently shake tubes 10 times to coat inner surface of tubes. DO NOT shake to froth. 3) Transport at room temperature.

Submit: Submit in original collection tubes.

If you have any questions, feel free to contact our Client Service Department at 651-232-3500.

Effective 2/24/2017, Mayo Medical Laboratory is performing testing of Thiopurine Methyltransferase (TPMT) Activity Profile, Erythrocytes and is longer referring testing to ARUP.

Panel Name: Thiopurine Methyltransferase (TPMT) Activity Profile, Erythrocytes
Panel Code: LAB3058 (TPMT)
CPT Code: 82657
Collect: Lavender Top Tube
Submit: 5 mL whole blood in original tube REFRIGERATED.
Unacceptable: Markedly hemolyzed specimen
Note: Green Top (Sodium or Lithium Heparin) whole blood are acceptable specimen types.
Test Performed at: Mayo Medical Laboratories
List Price: \$300.00

Panel Changes Con't.

Effective March 20, 2017 whole blood and EDTA plasma are no longer acceptable specimens for panel UMP, Ureaplasma Species, Molecular Detection, PCR.

Panel Name: Ureaplasma by PCR

Panel Code: UMP

CPT Code: 87798x2

Collect: Sterile Screw-Top Container

Submit: SWAB: Cervical, urethral or vaginal. Dacron or rayon swab with aluminum or plastic shaft. FLUID: 1-2 mL sterile screw top. Respiratory (neonate only <3 mos), reproductive, synovial. URINE: 2-10 mL.

Unacceptable: Wooden shaft, cotton swab, dry swab, Port-a-Cul tube, swab containing gel or charcoal, calcium-alginate tipped swabs, whole blood or EDTA plasma.

Note: Specimen source is REQUIRED.

Test Performed at: Mayo Medical Laboratories

List Price: \$113.48

Effective March 20, 2017 panel Ureaplasma species, Molecular Detection, PCR, Blood has been built as follows:

Panel Name: Ureaplasma, PCR, Blood

Panel Code: URBPR (LAB3091)

CPT Code: 87798x2

Collect: Lavender Top Tube

Submit: 1 mL whole blood REFRIGERATED in original tube.

Test Performed at: Mayo Medical Laboratories

List Price: \$113.48

Effective February 22, 2017 Mayo Medical Laboratories has changed methodology for Zonisamine. New methodology is Liquid Chromatography-Tandem Mass Spectrometry (LC-MS/MS).

Panel Name: Zonisamide

Panel Code: ZON

CPT Code: 80203

Collect: Plain Red Top

Submit: 1mL serum REFRIGERATED. Centrifuge and aliquot within 2 hours of collection.

Unacceptable:

Note: Recommended collection is 30 minutes before next dose.

Test Performed at: Mayo Medical Laboratories

List Price: Remains the same

CPT Code Changes

Effective April 1, 2017 Mayo Medical Laboratory implemented new CPT code changes.

Panel Name: HTLV I/II Antibody Cascade

Panel Code: TLV

Current CPT Code: 86687

NEW CPT Code: 86790

Panel Name: Lyme Disease, PCR

Panel Code: PBORB

Current CPT Code: 87476

NEW CPT Code: 87476 x1, 87798 x2

Panel Name: Lyme Disease, PCR, CSF or Synovial

Panel Code: PBORR

Current CPT Code: 87476

NEW CPT Code: 87476 x1, 87798 x2

Specimen requirement changes or pricing changes do not affect any of these tests.

If you have any questions, please contact Jamie Lemieux at 651-232-3528.

Fairview and HCMC Price Changes

Fairview and HCMC Laboratories are reference laboratories that perform specialty tests HealthEast Medical Laboratory does not perform in house.

Effective April 1, 2017 Fairview and HCMC Laboratories implemented the following price changes. The effective date is based on the date the specimens arrive in the laboratory.

Panel Code	Test Name	CPT	Current Price	New Price
F11	Factor 11 Assay	85270	\$114.49	\$116.50
F12	Factor 12 Assay	85280	\$123.45	\$125.70
FA2	Factor 2 Assay	85210	\$89.43	\$91.00
FA5	Factor 5 Assay	85220	\$ 98.45	\$100.00
FA7	Factor 7 Assay	85230	\$112.11	\$114.00
FA8	Factor 8 Assay	85240	\$77.26	\$78.50
FA9	Factor 9 Assay	85250	\$89.07	\$90.65
RCF	Ristocetin Cofactor if reflexed	85245	\$76.92	\$87.50
TT	Thrombin Time	85670	\$32.45	\$33.50

VWACTR	Von Willebrand Factor Activity with reflex	85245	\$93.90	\$130.50
CAM	Amniotic Fluid Chromosomes	88235/88269/ 88280/88285	\$ 581.85	\$521.00
CBM	Bone Marrow Chromosomes	88237/88264/ 88280	\$ 670.55	\$640.00

If you have questions, please contact Jamie Lemieux at 651-232-3528.

Mayo and MedTox Price Changes

Effective March 1, 2017 Mayo Medical Laboratories and MedTox Laboratories implemented the following price changes. The effective date is based on the date the specimens arrive in the laboratory.

Mayo Medical Laboratories Price Changes

Panel Code	Test Name	CPT	Current Price	New Price (eff. 3/1/2017)
MAM	6-Monoacetylmorphine, UR	80356	\$182.10	\$190.70
ADL	Adulterants, Urine	81005	\$23.10	\$23.80
AMPCS	FLUORESCENT ANTIBODY; SCREEN	86255	\$469.10	\$460.00
BIL	BILE ACIDS, TOTAL	82239	\$59.75	\$68.30
CALPR	CALPROTECTIN STOOL	83993	\$223.00	\$217.00
DIP	CULTURE,DIPHThERIA	87081	\$128.10	\$134.00
2C19B	2C19S - CYTOCHROME P450 2C19 GENOTYPE	81225	\$773.20	\$811.40
2C9B	2C9B - CYTOCHROME P450 2C9 GENOTYPE	81227	\$773.20	\$811.40
2D6CB	CYTOCHROME P450 2D6	81226	\$545.10	\$571.90
FTL	FENTANYL,URINE	80354	\$223.20	\$233.90
HCVGR	HCV GENOTYPE RESOLUTION	87902	\$88.00	\$91.90
HP6	HERPESVIRUS 6 ANTIBODIES	86790	\$94.93	\$99.72
UHIST	HISTOPLASMA ANTIGEN CASCADE, URINE	87385	\$115.90	\$110.90
HIVDI	HIV-1/-2 AB DIFFERENTIATION SO	86701/86702	\$195.80	\$205.10
NMDCS	NMDCS-NMDA-R AB CBA, S	86255	\$509.20	\$460.00
SCI	SCHISTOSOMA IGG ABY	86682	\$73.00	\$76.20
BCH	AMERICAN BEECH IGE (BECH)	86003	\$11.90	\$14.27
AMX	AMOXICILLIN IGE (AMOXY)	86003	\$11.90	\$14.27
APP	APPLE IGE (APPL)	86003	\$11.90	\$14.27
APR	APRICOT IGE (APR)	86003	\$11.90	\$14.27
AVO	AVOCADO IGE (AVOC)	86003	\$11.90	\$14.27
BAN	BANANA IGE (BANA)	86003	\$11.90	\$14.27
BGR	BARLEY (GRASS) IGE (BGRS)	86003	\$11.90	\$14.27
BAR	BARLEY, WHOLE GRAIN IGE (BRLY)	86003	\$11.90	\$14.27

BSL	BASIL IGE (BASL)	86003	\$11.90	\$14.27
BLF	BAYLEAF (LAUREL) IGE (BAYL)	86003	\$11.90	\$14.27
BKD	BEAN KIDNEY/RED BEAN IGE(KIDBN	86003	\$11.90	\$14.27
BWI	BEAN, WHITE IGE (BENW)	86003	\$11.90	\$14.27
BEF	BEEF IGE (BEEF)	86003	\$11.90	\$14.27
BRI	BEEF REGULAR INSULIN IGE(BREG)	86003	\$11.90	\$14.27
BTS	BEETS (BEETROOT) IGE (BEETS)	86003	\$11.90	\$14.27
BER	BERMUDA GRASS IGE (BERG)	86003	\$11.90	\$14.27
BLG	BETA LACTOGLOBULIN IGE (BLAC)	86003	\$11.90	\$14.27
BLB	BLACKBERRY IGE (BLACK)	86003	\$11.90	\$14.27
BMU	BLUE MUSSEL IGE (MUSS)	86003	\$11.90	\$14.27
BLU	BLUEBERRY IGE (BLUE)	86003	\$11.90	\$14.27
BRC	BROCCOLI IGE (BROC)	86003	\$11.90	\$14.27
BSP	BRUSSEL SPROUT IGE (BSPR)	86003	\$11.90	\$14.27
BWT	BUCKWHEAT IGE (BUCW)	86003	\$11.90	\$14.27
BDR	BUDGERIG, DROPPINGS IGE (BDRP)	86003	\$11.90	\$14.27
BFE	BUDGERIG, FEATHERS IGE (BFTH)	86003	\$11.90	\$14.27
CFE	CANARY FEATHERS IGE (CFTH)	86003	\$11.90	\$14.27
CAL	CANDIDA ALBICANS IGE (CDAB)	86003	\$11.90	\$14.27
CWY	CARAWAY IGE (CWAY)	86003	\$11.90	\$14.27
CAS	CASEIN IGE (CASE)	86003	\$11.90	\$14.27
CLW	CAULIFLOWER IGE (CALFL)	86003	\$11.90	\$14.27
CLY	CELERY IGE (CELY)	86003	\$11.90	\$14.27
CCD	CHEESE, CHEDDAR IGE (CCHZ)	86003	\$11.90	\$14.27
CMD	CHEESE, MOLD TYPE IGE (MCHZ)	86003	\$11.90	\$14.27
CHR	CHERRY IGE (CHER)	86003	\$11.90	\$14.27
CKP	CHICK PEA IGE (CHXP)	86003	\$11.90	\$14.27
CDR	CHICKEN DROPPINGS IGE (CDROP)	86003	\$11.90	\$14.27
CFT	CHICKEN FEATHERS IGE(CHCK)	86003	\$11.90	\$14.27
CHC	CHOCOLATE IGE (COCOA)	86003	\$11.90	\$14.27
CIN	CINNAMON IGE (CINN)	86003	\$11.90	\$14.27
CLV	CLOVES IGE (CLOV)	86003	\$11.90	\$14.27
COC	COCONUT IGE (CCNT)	86003	\$11.90	\$14.27
CPL	CORN POLLEN IGE (CRNP)	86003	\$11.90	\$14.27
COW	COW EPITHELIA IGE (COW)	86003	\$11.90	\$14.27
CRB	CRAB IGE (CRAB)	86003	\$11.90	\$14.27
CRF	CRAYFISH, FRESHWATER IGE (CRAY	86003	\$11.90	\$14.27
CUC	CUCUMBER IGE (CUKE)	86003	\$11.90	\$14.27
DTE	DATE IGE (DATE)	86003	\$11.90	\$14.27
DIL	DILL IGE (DILL)	86003	\$11.90	\$14.27
DFE	DUCK FEATHERS IGE(DUCK)	86003	\$11.90	\$14.27

PGF	FEATHERS, PIGEON IGE (PIGF)	86003	\$11.90	\$14.27
FBK	FIREBUSH (KOCHIA) IGE (FBSH)	86003	\$11.90	\$14.27
GAR	GARLIC IGE (GARL)	86003	\$11.90	\$14.27
GER	GERBIL EPITHELIA IGE (GERB)	86003	\$11.90	\$14.27
GGR	GINGER IGE (GING)	86003	\$11.90	\$14.27
GTN	GLUTEN IGE (GLT)	86003	\$11.90	\$14.27
GRD	GOLDENROD IGE (GLDR)	86003	\$11.90	\$14.27
GFE	GOOSE FEATHERS IGE (GOOS)	86003	\$11.90	\$14.27
GRP	GRAPE IGE (GRAP)	86003	\$11.90	\$14.27
GPF	GRAPEFRUIT IGE (GRFR)	86003	\$11.90	\$14.27
BSG	GREEN BEAN IGE (GSTB)	86003	\$11.90	\$14.27
PGN	GREEN PEA IGE (GPEA)	86003	\$11.90	\$14.27
GUA	GUAVA IGE (GUAV)	86003	\$11.90	\$14.27
GUI	GUINEA PIG EPITHELIA IGE(GUIN)	86003	\$11.90	\$14.27
HAL	HALIBUT IGE (HALI)	86003	\$11.90	\$14.27
HMS	HAMSTER EPITHELIUM IGE (HEPI)	86003	\$11.90	\$14.27
HEL	HELMIN.HALODES IGE (HELM)	86003	\$11.90	\$14.27
HRR	HERRING IGE (HERR)	86003	\$11.90	\$14.27
HCK	HICKORY, WHITE IGE (WHIC)	86003	\$11.90	\$14.27
HON	HONEY IGE (HUNY)	86003	\$11.90	\$14.27
HOV	HONEYBEE IGE (HBV)	86003	\$11.90	\$14.27
HEU	HORNET, EUROPEAN IGE (EHOR)	86003	\$11.90	\$14.27
HWF	HORNET, WHITE-FACED IGE (WFHV)	86003	\$11.90	\$14.27
HYF	HORNET, YELLOW IGE (YFHV)	86003	\$11.90	\$14.27
HRS	HORSE DANDER IGE (HORS)	86003	\$11.90	\$14.27
HUI	HUMAN INSULIN IGE (INHU)	86003	\$11.90	\$14.27
LMB	LAMB IGE (LAMB)	86003	\$11.90	\$14.27
LMQ	LAMB'S QUARTER IGE (LAMQ)	86003	\$11.90	\$14.27
LEM	LEMON IGE (LEM)	86003	\$11.90	\$14.27
LTL	LENTIL IGE (LEN)	86003	\$11.90	\$14.27
LTT	LETTUCE IGE (LETT)	86003	\$11.90	\$14.27
LIM	LIME IGE (LIME)	86003	\$11.90	\$14.27
MAC	MACKEREL IGE (MACK)	86003	\$11.90	\$14.27
MLT	MALT IGE (MALT)	86003	\$11.90	\$14.27
MAN	MANDARIN IGE (MAND)	86003	\$11.90	\$14.27
MGO	MANGO IGE (MANGO)	86003	\$11.90	\$14.27
MEL	MELONS IGE (MELN)	86003	\$11.90	\$14.27
MGT	MILK, GOAT IGE (GMILK)	86003	\$11.90	\$14.27
MPR	MILK, PROCESSED IGE (PMLK)	86003	\$11.90	\$14.27
MSH	MUSHROOM IGE (MUSH)	86003	\$11.90	\$14.27
MSD	MUSTARD IGE (MSTD)	86003	\$11.90	\$14.27

NTL	NETTLE IGE (NETT)	86003	\$11.90	\$14.27
NMG	NUTMEG IGE (NMEG)	86003	\$11.90	\$14.27
ONN	ONION IGE (ONIN)	86003	\$11.90	\$14.27
ORG	ORANGE IGE (ORNG)	86003	\$11.90	\$14.27
ORE	OREGANO IGE (OREG)	86003	\$11.90	\$14.27
OYS	OYSTER IGE (OYST)	86003	\$11.90	\$14.27
PAP	PAPAYA IGE (PAPY)	86003	\$11.90	\$14.27
PAR	PARSLEY IGE (PSLY)	86003	\$11.90	\$14.27
PCH	PEACH IGE (PECH)	86003	\$11.90	\$14.27
PRR	PEAR IGE (PEAR)	86003	\$11.90	\$14.27
PNG	PENICILLIN G IGE (PBPO)	86003	\$11.90	\$14.27
PNV	PENICILLIN V IGE (PENIV)	86003	\$11.90	\$14.27
BPP	PEPPER, BLACK/WHIT IGE (BLPEP)	86003	\$11.90	\$14.27
CLI	PEPPER, CHILI IGE (CHILI)	86003	\$11.90	\$14.27
PPG	PEPPER, GREEN BELL IGE (GPEP)	86003	\$11.90	\$14.27
PDR	PIGEON DROPPINGS IGE (PDRP)	86003	\$11.90	\$14.27
PNE	PINE, WHITE IGE (WPIN)	86003	\$11.90	\$14.27
PPL	PINEAPPLE IGE (PNAP)	86003	\$11.90	\$14.27
PIT	PINENUT IGE (PINE)	86003	\$11.90	\$14.27
PLM	PLUM IGE (PLUM)	86003	\$11.90	\$14.27
POP	POPPY SEED IGE (POPSD)	86003	\$11.90	\$14.27
POR	PORK IGE (PORK)	86003	\$11.90	\$14.27
PKI	PORK INSULIN IGE (PREGI)	86003	\$11.90	\$14.27
PWT	POTATO IGE (POTA)	86003	\$11.90	\$14.27
PSW	POTATO, SWEET IGE (SPOT)	86003	\$11.90	\$14.27
RAB	RABBIT EPITHELIUM IGE (REPII)	86003	\$11.90	\$14.27
RGF	RAGWEED,FALSE IGE (FRW)	86003	\$11.90	\$14.27
RHZ	RHIZOPUS NIGRICANS IGE(RHNI)	86003	\$11.90	\$14.27
RYY	RYE (GRAIN) IGE (RYE)	86003	\$11.90	\$14.27
SAR	SARDINE IGE (SARD)	86003	\$11.90	\$14.27
SSD	SESAME SEED IGE (SESA)	86003	\$11.90	\$14.27
SPR	SPRUCE TREE IGE (SPRU)	86003	\$11.90	\$14.27
SQU	SQUASH, PUMPKIN IGE (SQUA)	86003	\$11.90	\$14.27
STB	STRAWBERRY IGE (STBY)	86003	\$11.90	\$14.27
THY	THYME IGE (THYM)	86003	\$11.90	\$14.27
TRT	TROUT IGE(TROT)	86003	\$11.90	\$14.27
TUR	TURKEY IGE(TURK)	86003	\$11.90	\$14.27
VNL	VANILLA IGE(VANIL)	86003	\$11.90	\$14.27
WAL	WALNUT TREE IGE (WALN)	86003	\$11.90	\$14.27
WSP	WASP (PAPER) VENOM IGE (WSPV)	86003	\$11.90	\$14.27
WHY	WHEY IGE (WHEY)	86003	\$11.90	\$14.27

WIL	WILLOW TREE IGE(WILL)	86003	\$11.90	\$14.27
YST	YEAST, BAKER'S IGE(BYST)	86003	\$11.90	\$14.27
YJV	YELLOW JACKET VENOM IGE(YJV)	86003	\$11.90	\$14.27

MedTox Price Changes

Panel Code	Test Name	CPT	Current Price	New Price (eff. 3/1/2017)
ARP	Aripiprazole	80342	\$63.27	\$60.22
ASX	Arsenic Fractionation	82175	\$113.20	\$110.50
ASU	Arsenic, Urine	82175	\$47.65	\$45.46
ASB	Arsenic, Whole Blood	82175	\$53.50	\$51.79
BHG	Blood Mercury	83825	\$39.89	\$35.89
POX	Carbamazepine-10, 11-Epoide	80156	\$40.31	\$35.82
CPM	Clomipramine (Anafranil)	80355	\$48.60	\$44.96
L08	Drugs of Abuse, Urine Scrn 1	80307/80320	\$34.77	\$30.17
MTB	Heavy Metal Blood Scrn 1	82175/83655/83825	\$107.61	\$106.35
VIM	Lacosamide	80339	\$119.37	\$118.59
LID	Lidocaine (Xylocaine)	80176	\$48.57	\$44.92
RMG	Magnesium, RBC	83735	\$28.41	\$23.95
M10	Meconium Panel 10 Scrn	80307	\$129.77	\$129.40
UHG	Mercury, Urine	83825	\$39.89	\$35.89
PTB	Pentobarbital (Nembutal)	80345	\$96.34	\$68.62
RSP	Risperidone and metabolite	80342	\$79.62	\$81.01
TCY	Thiocyanate	84430	\$55.78	\$52.43
TRZ	Trazodone (Desyrel)	80338	\$47.75	\$48.51
CUU	Urine Copper	82525	\$48.73	\$45.09
MTU	Urine Metal Scrn 1	82175/83655/83825	\$78.00	\$75.55
VPA	Valproic Acid, Unbound	80165	\$39.31	\$39.01

If you have questions, please contact Jamie Lemieux at 651-232-3528.

Urine Culture Diagnosis Codes

Urine Culture CPT 87086 is one of the top laboratory tests submitted to HealthEast Medical Laboratory with a **“non-covered”** diagnosis. One of the most frequently used: ICD-10 codes is **F29 – “Unspecified Psychosis”**

This **F29** ICD-10 code is not due to a substance or known physiological condition.

F29 is **NOT** a covered ICD-10 code and therefore considered **“not medically necessary”** under CMS NCD –National Coverage Determination. Tests medically necessary for the diagnosis or treatment of the patient should be ordered, along with the diagnosis that supports testing.

Please visit the link below as a guide for determining if the test is reimbursable by Medicare based on the patient's symptoms or medical condition.

www.healtheast.org/laboratory/he-med-lab/hml-billing-resources.html

HealthEast Medical Laboratory does not recommend any diagnosis codes.

Our coding department will make one attempt to obtain another diagnosis consistent with documentation in the patient's medical records. Tests without a covered diagnosis will be billed to your facility if we do not have a signed and valid (ABN) Advance Beneficiary notice on file.

Should you have any questions please feel free to contact our Billing team at: 651-232-1122 or alansiquot@healtheast.org.

Annual Medical Necessity Reminder Notice!

April 2017

HealthEast Medical Laboratory would like to remind all of our medical staff about the importance of providing medical necessity documentation for the laboratory procedures performed on patients for whom we will be billing Medicare or other third party payers.

Please indicate the diagnosis, symptoms, or reason for performing each laboratory test ordered on the HML laboratory requisition. Please note that this documentation must also be available in your medical records.

Organ or disease-related profiles will only be reimbursed when all components are medically necessary. Routine chemistry profiles are considered screening tests and are therefore not reimbursable. The Office of Inspector General (OIG) takes the position that physicians who knowingly order medically unnecessary tests for which Medicare reimbursement is requested may be subject to civil, criminal and administrative penalties and sanctions.

HealthEast Pathologists are available to assist with determining appropriate protocols (651-232-3500).

Debra Rodahl
HealthEast Laboratory
Group Director

Eric Razskazoff
HealthEast Medical Laboratory
Sales Manager

Joseph Leverone, M.D.
HealthEast Laboratory
Medical Director

Online Supply Order Changes

Beginning January 1st, 2017, HML will no longer accept faxed supply requests.

Please visit the Online Supply Order Page at:

www.healtheast.org/hml

OR

<https://www.healtheast.org/forms/form-hml-supply-request.html>

The image shows a screenshot of a web browser displaying the HealthEast Medical Labs Supply Request form. The page header includes the HealthEast logo and navigation links for Health & Well-Being, Medical Care, About Us, and My HealthEast. The main heading is "LABORATORY" with the tagline "Accurate, efficient and cost-effective." Below this is the title "HEALTHEAST MEDICAL LABS SUPPLY REQUEST". The form section is titled "REQUIRED INFORMATION" and contains several input fields: "Facility full name", "Address" (with a sub-field for "Suite #"), "City", and "State". The browser's taskbar at the bottom shows the time as 1:02 PM on 1/14/2017.

Complete the requested information and click on “Submit Request”,

You will receive an email receipt confirming your order.

(If you do not receive an email confirmation of your order – your order did not go through, PLEASE RESEND)

Most supply orders turnaround times are within 5 -7 business days.

Please contact HML Customer Service 651-232-3500 option 5 with questions or concerns.

Laboratory Supply Orders



WE ARE LISTENING

We value our customer's feedback and appreciate you telling us how we can improve our services.

We know as of late we have had issues related to LABORATORY SUPPLY order fulfillment. Filling supplies has many moving parts and we realize there were times we just weren't meeting expectations.

You should have already received some communications surrounding some upcoming changes. There are many other changes happening behind the scenes – which you can expect to improve fulfillment overall. Change is never easy, but improving work flows must happen to be sure you and your teams can provide the best patient care possible.

Here are some of the changes related to supply ordering that have already or will be taking place over the next few weeks:

- *Supply requests fulfilled within in 5 to 7 business days. We are doing our best to be sure orders do not fall outside of this timeframe*
- *Updated the HML Supply Order Website*
- *All website orders will receive an email confirmation of your order. If you didn't receive a confirmation – we didn't receive the order.*
- *If you do not receive your supplies within the 5 to 7 business days. Please call and let us know.*
- *Effective May 1, 2017 – We will no longer able to accommodate STAT, URGENT or ASAP supply requests. If you are in need of STAT, URGENT or ASAP supplies, please make alternate plans.*
- *New communication related to BACK ORDERED supplies from our vendors – which impacts your supply request.*
- *Supplies may only be ordered online – faxed requests cannot be accepted.*



Please PLAN ahead in your laboratory supply order requests:

EXPIRED SUPPLIES FULFILLMENT TIME

Seasonal needs such as:

INFLUENZA STREP THROAT RSV PERTUSSIS

<http://www.healtheast.org/forms/form-hml-supply-request.html>

Sending Specimens to HML

When sending a specimen to HML, please be sure to include the **date and time** the specimen was collected on your HML requisition. This information is required and we CANNOT process incoming specimens unless we have this information.

When your site is in need of a specimen pick up - please call 651-232-3500 **Option #1** to reach the laboratory courier service.

Residents Room Number on Laboratory Draw Requests -

Ninety percent (90%) of the lab draw requests we receive at HML are rejected due to your lab request missing your resident's **ROOM NUMBER**. *How will we know where to go?*

Please remind staff to complete all information on the HML Requisition - including ROOM NUMBER. No Room Number?? – Staff can put NA.

Thank you for your continued partnership.

Please call HML customer service 651-232-3500 option # 5, with questions or concerns.

Reference Manual

HML has gone green! The reference manual is no longer being printed, but the good news is, the online reference manual sections are updated at least twice a year and the alpha Test Listing is updated every Monday morning! If you ever have any questions, please contact our Customer Service at 651-232-3500, option 5.

Consultant's Corner

Documentation of Temperature and Humidity Requirements

As we begin to look forward to spring and all that warmer weather has to offer, now is a good time to review temperature and humidity requirements for the laboratory. Here are a few reminders...

Temperatures should be recorded each day of patient testing. An acceptable range should be established by consulting information that comes with the instruments and kits used in your laboratory. Temperature problems can adversely affect the integrity of reagents, specimens, instruments, and kits. Remember to always document the actions taken whenever a temperature problem is detected. If the corrective action included adjusting the thermostat, make sure to recheck temperature and record results after allowing sufficient time for temperature to adjust.

An update from the 2-2016 COLA Technical Bulletin revised Survey Criteria MA 15 R, removing the requirement to check thermometers annually, and instead requires that thermometers are verified for accuracy prior to use. Thermometers can be checked by comparing them to a National Institute for Standards and Technologies (NIST) standard thermometer or another certified thermometer.

It's important to remember that refrigerators and incubators may have "cold spots" or "hot spots". Windows and air vents may cause these same conditions in rooms. Therefore, it is important to place thermometers in locations which reflect the most consistent temperature of the area. If a thermometer is found to be broken or defective, it should be replaced.

Most instruments have an acceptable operating range for humidity that is easily met and maintained. However, others may have a narrow range, as humidity can affect instrument performance or accuracy and sensitivity of the test method. Humidity requirements can often be found in the environmental conditions or specifications in the operator's manual generally found in the "Set Up" or "Installation" sections. If the humidity does exceed the manufacturer's limits, patient testing should not continue until the problem is corrected. A hygrometer, used for monitoring humidity in percent, may be obtained from many hardware stores, discount stores, and laboratory suppliers.

Remember, if proper storage conditions are not maintained, the integrity of reagents, controls, calibrators, and patient specimens cannot be assured. It is the responsibility of all lab personnel to provide the most accurate patient results and ensure compliance by maintaining proper temperature and humidity requirements, accurately recording results, and performing and documenting corrective action as indicated.

EDUCATION

Basic Phlebotomy Techniques: The First Step in Quality Patient Results

Friday, June 30, 2017

8:00am – 12:00 Noon

Woodwinds Health Campus, Auditorium A

Friday, September 29, 2017

8:00am – 12:00 Noon

Woodwinds Health Campus, Auditorium A

Friday, November 10, 2017

8:00am – 12:00 Noon

Woodwinds Health Campus, Auditorium A

Disclaimer:

Attending this HML program does not indicate nor guarantee competence or proficiency in the performance of any procedures that may be discussed or taught in this course.

Program Summary

This seminar / skills training session is designed for health care professionals to provide a basic understanding of clinical laboratory sample requirements, NCCLS Standards regarding venous site selection, proper equipment, sampling methods, specimen handling and transport, and related patient care requirements. The target audience for this class is **RN, LPN, CMA, MA, MLT, MT**.

For questions: Linda Wagener- 651-232-6925 or email ljwagener@healtheast.org or Karen Anderson-651-232-3190 or kkanderson@healtheast.org.