

Lab Focus

December 2004—monthly insert to 'Scope from Fairview Clinical Laboratories

Sound bites. . . .

WNV Season Ends

Testing for West Nile Virus, IgG and IgM Antibodies will be discontinued Dec. 1, 2004 and resume May 1, 2005.

Glomerular Filtration Rate Calculation Established

Glomerular filtration rate (GFR) traditionally is considered the best overall index of renal function in health and disease. A low or decreasing GFR is a good index of chronic kidney disease. Because GFR is difficult to measure in clinical practice, formulas have been developed to estimate creatinine clearance.

The National Kidney Disease Education Program (NKDEP) Web site:

http://www.nkdep.nih.gov/healthprofessionals/tools/gfr_adults.htm

contains the GFR MDRD equation to calculate GFR from serum creatinine for adults.

We recommend providers use this equation as a measure of GFR rather than a creatinine clearance that requires timed urine collections, which are inconvenient to collect and despite everyone's best efforts are frequently inadequate.

Please take time to page through the NKDEP Web site for additional information. John Eckfeldt, MD, PhD, is working closely with the group that developed this information to refine estimates of GFR. In addition, the laboratory likely soon will offer cystatin C as a better procedure to estimate GFR. Once both creatinine and cystatin C are available, we think the need to order creatinine clearances will greatly diminish.

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Laboratory Compliance Update for Physicians: Medicare Coverage Policies and Reimbursement

Over the next few months, the Laboratory will review compliance issues that relate specifically to providers responsible for ordering laboratory testing. This issue will focus on Medicare local coverage decisions (LCD), national coverage determinations (NCD), AMA-approved panels and fee schedules from our Medicare carrier and fiscal intermediary. Future issues will include information about Medical Necessity, Advanced Beneficiary Notices (ABN) and reflex testing.

In order to ensure that services paid for by Medicare are indeed medically necessary, the Centers for Medicare and Medicaid Services (CMS), the agency responsible for administering the Medicare program, has directed its carriers and intermediaries to identify those laboratory tests that require medical necessity documentation. Effective Nov. 25, 2002, there are 23 medical necessity policies called National Coverage Determinations (NCD) that are standard across the United States. Additionally, local carriers/intermediaries can continue to establish local

coverage decisions (LCD) for other tests. These LCD/NCDs define the documentation for medical necessity required before a claim will be paid for these tests. Fairview Laboratory Services maintains both the LCD/NCDs on our laboratory Web site. The link to this medical necessity documentation is:

http://contentprod.fairview.org/fv/groups/public/documents/publishedweb/lmrp_c_061449.hcsp

This site includes three sections:

- NCD Release Manual, which applies to all patients. Click on the document and follow the instructions included. All 23 tests are listed in an index on page 16 of the document. Changes or additions to acceptable coding for each of the test policies are included at the beginning of this document.
- LCDs from the fiscal intermediary Noridian apply to hospital-based clinic patients and registered outpatients. Click on the LCD you wish to review.
- LCDs from the carrier Wisconsin Physician Services (WPS) apply to all of our 15 Fairview metro clinics. Click on the LCD you wish to review.

The information listed in these policies should not be used in a way that leads to assigning ICD-9 codes that will ensure payment for the testing which you have ordered. Remember, the documentation in the patient's medical record must support the diagnosis information sent in on the claim for reimbursement. It is recommended that you familiarize yourself with the information on this Web site and to understand those tests that you order for which LCDs/NCDs are applicable.

At all outpatient/ambulatory settings within Fairview, AMA organ and disease related panels will be billed and paid only when all the components of the panel are medically necessary. Be sure you have reviewed the contents of each of these panels to ensure each test is medically necessary. The AMA-approved panels offered by the Fairview Laboratories are listed in Table 1 with their panel members.

All outpatient and ambulatory patients whose payer is Medicare are reimbursed on the Medicare Laboratory Fee Schedule. To view the fee schedule for laboratory tests for those claims processed by Noridian, go to the Web site:

http://www.noridianmedicare.com/provider/pubs/med_a/fee_sched.html

Table 1: AMA Approved Panels

	Basic Metabolic Panel	Electrolyte Panel	Comprehensive Metabolic Panel	Lipid Panel	Hepatic Function Panel	Renal Function Panel
Albumin			X		X	X
Alkaline phosphatase			X		X	
ALT			X		X	
AST			X		X	
Bilirubin, direct					X	
Bilirubin, total			X		X	
Calcium	X		X			X
Carbon dioxide (CO2)	X	X	X			X
Chloride	X	X	X			X
Cholesterol, total				X		
Creatinine	X		X			X
HDL (high density cholesterol)				X		
Glucose	X		X			X
Phosphorus						X
Potassium			X			X
Protein, total			X		X	
Triglycerides				X		
Sodium	X	X	X			X
Urea nitrogen (BUN)	X	X				X

To view the fee schedule for laboratory tests for those claims processed by WPS, go to the Web site:

http://www.wpsic.com/medicare/provider/pricing_fees.shtml

For the payer Medicaid, reimbursement will be equal to or less than Medicare reimbursement.

Medical directors are available for clinical consultation. The name and phone number of the consultant for each site are listed in the Laboratory Guide. The link to the Web site is:

<http://labguide.fairview.org/>.

To view the medical director/clinical consultant for the site, double click on the location desired. The name and phone number of the contact will be listed in each document.

*Fairview Laboratory
Compliance Committee*