

Respiratory Pathogen Panel

Reimbursement Policy ID: RPC.0096.72KF

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Keystone First Community HealthChoices reimbursement policies and their resulting edits are based on guidelines from established industry sources, such as the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), state and federal regulatory agencies, and medical specialty professional societies. Reimbursement policies are intended as a general reference and do not constitute a contract or other guarantee of payment. Keystone First Community HealthChoices may use reasonable discretion in interpreting and applying its policies to services provided in a particular case and may modify its policies at any time.

In making claim payment determinations, the health plan also uses coding terminology and methodologies based on accepted industry standards, including Current Procedural Terminology (CPT®); the Healthcare Common Procedure Coding System (HCPCS); and the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), and other relevant sources. Other factors that may affect payment include medical record documentation, legislative or regulatory mandates, a provider's contract, a member's eligibility in receiving covered services, submission of clean claims, other health plan policies, and other relevant factors. These factors may supplement, modify, or in some cases supersede reimbursement policies.

This reimbursement policy applies to all health care services billed on a CMS-1500 form or its electronic equivalent, or when billed on a UB-04 form or its electronic equivalent.

To the extent that any procedure and/or diagnosis codes are specified in this policy, such inclusion is provided for reference purposes only, may not be all inclusive, and is not intended to serve as billing instructions. Listing of a code in this policy does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by federal, state, or contractual requirements and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Policies and Guidelines may apply.

Policy Overview

This policy addresses requirements for reimbursement of respiratory pathogen lab panels.

Exceptions

N/A

Respiratory Virus Panel

Reimbursement Guidelines

Respiratory pathogen panels are reimbursable when specific criteria are met.

Respiratory pathogen panel testing for five pathogens or fewer are considered reimbursable when meeting both of the following criteria:

The member has one of the following clinical indications for infectious disease testing:

- The member is immunocompetent, and the clinical indication includes a presumption of active infection or infection-associated complications (which may include exacerbation of underlying disease) that require the identification of a causative organism for appropriate management.
- The member is immunocompromised (i.e., those with weakened immune systems including those with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS), those who are taking immunosuppressive medications (i.e., chemotherapy, biologics, transplant-related immunosuppressive drugs, high-dose systemic corticosteroids) and those with inherited diseases that affect the immune system (i.e., congenital immunoglobulin deficiencies).

Refer to the "Respiratory Pathogen Panel Clinical Indicator Codes" below for clinical indicator codes.

Respiratory pathogen testing for six pathogens, or more is considered reimbursable when meeting the following:

- Both of the criteria above are met, and any one of the following:
 - Place of service 21 (Inpatient hospital), 22 (Observation) or 23 (Emergency room)
 - Member is immunocompromised, as specified above.
 - Member is immunocompetent with a severe and established underlying respiratory pathology (i.e., severe asthma, chronic obstructive pulmonary disease (COPD), cystic fibrosis, pulmonary fibrosis, radiation therapy to the lung). Treatment with antibiotics may be indicated according to established guidelines.

Respiratory Virus Panel Clinical Indicator Codes

Table 1: CPT code without a specific diagnosis code requirement.

| CPT Codes | Description |
|-----------|---|
| 87631 | Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (e.g., adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3-5 targets. |
| 87636 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique. |
| 87637 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), influenza virus types A and B, and respiratory syncytial virus, multiplex amplified probe technique. |

| O240U | Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 3 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B), upper respiratory specimen, each pathogen reported as detected or not detected. |
|-------|--|
| O241U | Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 4 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B, respiratory syncytial virus [RSV]), upper respiratory specimen, each pathogen reported as detected or not detected |

Table 2: CPT codes that support medical necessity when billed with place of service codes in table 3 and a diagnosis code in both table 4 and table 5, or a diagnosis code in table 6.

| CPT Codes | Description |
|-----------|---|
| 0115U | Respiratory infectious agent detection by nucleic acid (DNA and RNA), 18 |
| | viral types and subtypes and 2 bacterial targets, amplified probe |
| | technique, including multiplex reverse transcription for RNA targets, each |
| | analyte reported as detected |
| | or not detected |
| 0202U | Infectious disease (bacterial or viral respiratory tract infection), pathogen- |
| | specific nucleic acid (DNA or RNA), 22 targets including severe acute |
| | respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, |
| | nasopharyngeal |
| | swab, each pathogen reported as detected or not detected |
| 0223U | Infectious disease (bacterial or viral respiratory tract infection), pathogen- |
| | specific nucleic acid (DNA or RNA), 22 targets including severe acute |
| | respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, |
| | nasopharyngeal |
| 000511 | swab, each pathogen reported as detected or not detected |
| 0225U | Infectious disease (bacterial or viral respiratory tract infection) pathogen- |
| | specific DNA and RNA, 21 targets, including severe acute respiratory |
| | syndrome coronavirus 2 (SARSCoV-2), amplified probe technique, |
| | including multiplex reverse transcription for RNA targets, each analyte |
| | reported as detected or not |
| 07000 | detected |
| 87632 | Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus |
| | (e.g., adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza |
| | virus, |
| | respiratory syncytial virus, rhinovirus), includes multiplex reverse |
| | transcription, |
| | when performed, and multiplex amplified probe technique, multiple types or |
| | subtypes, 6-11 targets |
| 87633 | Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus |
| | (e.g., adenovirus, influenza virus, coronavirus, metapneumovirus, |
| | parainfluenza virus, respiratory syncytial virus, rhinovirus), includes |
| | multiplex reverse transcription, when performed, and multiplex amplified |
| | probe technique, multiple types or |
| | subtypes, 12-25 targets |
| I | |

| Place of Servic e Code | Description |
|------------------------------|-----------------------------------|
| 19 | Off Campus Outpatient Hospital |
| 21 | Inpatient Hospital |
| 22 | Outpatient Hospital (Observation) |
| 23 | Emergency Room |

 Table 3: Place of Service Codes Required for Codes in Table 2

Table 4: ICD-10 Diagnosis Codes that Support Medical Necessity for CPT Codes inTable 2 when Billed with a Diagnosis Code in Table 5

| ICD-10-CM | Description | |
|-----------|--|--|
| Code | · | |
| A37.00 | Whooping cough due to Bordetella pertussis without pneumonia | |
| A37.01 | Whooping cough due to Bordetella pertussis with pneumonia | |
| A37.10 | Whooping cough due to Bordetella parapertussis without pneumonia | |
| A37.11 | Whooping cough due to Bordetella parapertussis with pneumonia | |
| A37.80 | Whooping cough due to other Bordetella species without pneumonia | |
| A37.81 | Whooping cough due to other Bordetella species with pneumonia | |
| A37.90 | Whooping cough, unspecified species without pneumonia | |
| A37.91 | Whooping cough, unspecified species with pneumonia | |
| A41.81 | Sepsis due to Enterococcus | |
| A41.9 | Sepsis, unspecified organism | |
| A48.1 | Legionnaires' disease | |
| A48.2 | Nonpneumonic Legionnaires' disease (Pontiac fever) | |
| B25.0 | Cytomegaloviral pneumonitis | |
| B33.23 | Viral pericarditis | |
| B33.24 | Viral cardiomyopathy | |
| B59 | Pneumocystosis | |
| B97.21 | SARS-associated coronavirus as the cause of diseases classified elsewhere | |
| B97.29 | Other coronavirus as the cause of diseases classified elsewhere | |
| J05.0 | Acute obstructive laryngitis (croup) | |
| J06.9 | Acute upper respiratory infection, unspecified | |
| J09.X1 | Influenza due to identified novel influenza A virus with pneumonia | |
| J09.X2 | Influenza due to identified novel influenza A virus with other respiratory | |
| | manifestations | |
| J09.X3 | Influenza due to identified novel influenza A virus with gastrointestinal | |
| | manifestations | |
| J09.X9 | Influenza due to identified novel influenza A virus with other manifestations | |
| J10.01 | Influenza due to other identified influenza virus with the same other identified | |
| | influenza virus pneumonia | |
| J10.08 | Influenza due to other identified influenza virus with other specified | |
| 110.1 | pneumonia | |
| J10.1 | Influenza due to other identified influenza virus with other respiratory | |
| | manifestation | |

| J10.2 | Influenza due to other identified influenza virus with gastrointestinal |
|---------|--|
| 510.2 | manifestations |
| J10.81 | Influenza due to other identified influenza virus with encephalopathy |
| J10.82 | Influenza due to other identified influenza virus with myocarditis |
| J10.83 | Influenza due to other identified influenza virus with otitis media |
| J10.89 | Influenza due to other identified influenza virus with other manifestation |
| J11.08 | Influenza due to unidentified influenza virus with specified pneumonia |
| J11.1 | Influenza due to unidentified influenza virus with other respiratory manifestations |
| J11.2 | Influenza due to unidentified influenza virus with gastrointestinal manifestations |
| J11.81 | Influenza due to unidentified influenza virus with encephalopathy |
| J11.82 | Influenza due to unidentified influenza virus with myocarditis |
| J11.83 | Influenza due to unidentified influenza virus with otitis media |
| J11.89 | Influenza due to unidentified influenza virus with other manifestations |
| J12.0 | Adenoviral pneumonia |
| J12.1 | Respiratory syncytial virus pneumonia |
| J12.2 | Parainfluenza virus pneumonia |
| J12.3 | Human metapneumovirus pneumonia |
| J12.81 | Pneumonia due to SARS-associated coronavirus |
| J12.82 | Pneumonia due to coronavirus disease 2019 |
| J12.89 | Other viral pneumonia |
| J12.9 | Viral pneumonia, unspecified |
| J13 | Pneumonia due to Streptococcus pneumoniae |
| J15.0 | Pneumonia due to Klebsiella pneumoniae |
| J15.1 | Pneumonia due to Pseudomonas |
| J15.20 | Pneumonia due to staphylococcus, unspecified |
| J15.211 | Pneumonia due to Methicillin susceptible Staphylococcus aureus |
| J15.212 | Pneumonia due to Methicillin resistant Staphylococcus aureus |
| J15.29 | Pneumonia due to other staphylococcus aureus |
| J15.3 | Pneumonia due to streptococcus, group B |
| J15.4 | Pneumonia due to other streptococcus |
| J15.7 | Pneumonia due to Mycoplasma pneumoniae |
| J15.8 | Pneumonia due to other specified bacteria |
| J15.9 | Pneumonia due to bacterial pneumonia |
| J16.0 | Chlamydial pneumonia |
| J16.8 | Pneumonia due to other specified infectious organisms |
| J18.0 | Bronchopneumonia, unspecified organism |
| J18.1 | Lobar pneumonia, unspecified organism |
| J18.2 | Hypostatic pneumonia, unspecified organism |
| J18.8 | Other pneumonia, unspecified organism |
| J18.9 | Pneumonia, unspecified organism |
| J20.0 | Acute bronchitis due to Mycoplasma pneumoniae |
| J20.1 | Acute bronchitis due to Hemophilus influenzae |
| J20.2 | Acute bronchitis due to streptococcus |
| J20.3 | Acute bronchitis due to coxsackievirus |
| J20.4 | Acute bronchitis due to parainfluenza virus |
| J20.5 | Acute bronchitis due to respiratory syncytial virus |

| J20.6 | Acute bronchitis due to rhino virus | |
|---------|---|--|
| J20.8 | Acute bronchitis due to other specified organisms | |
| J20.9 | Acute bronchitis, unspecified | |
| J21.9 | Acute bronchiolitis, unspecified | |
| J22 | Unspecified acute lower respiratory infection | |
| J44.0 | Chronic obstructive pulmonary disease with (acute) lower respiratory infection | |
| J44.1 | Chronic obstructive pulmonary disease with acute exacerbation | |
| J45.31 | Mild persistent asthma with (acute) exacerbation | |
| J45.32 | Mild persistent asthma with status asthmaticus | |
| J45.41 | Moderate persistent asthma with (acute) exacerbation | |
| J45.42 | Moderate persistent asthma with status asthmaticus | |
| J45.51 | Severe persistent asthma with (acute) exacerbation | |
| J45.52 | Severe persistent asthma with status asthmaticus | |
| J45.901 | Unspecified asthma with (acute) exacerbation | |
| J45.902 | Unspecified asthma with status asthmaticus | |
| J84.116 | Cryptogenic organizing pneumonia | |
| J84.117 | Desquamative interstitial pneumonia | |
| J84.2 | Lymphoid interstitial pneumonia | |
| J85.0 | Gangrene and necrosis of lung | |
| J85.1 | Abscess of lung with pneumonia | |
| J85.2 | Abscess of lung without pneumonia | |
| J85.3 | Abscess of mediastinum | |
| R05.1 | Acute cough | |
| R05.2 | Subacute cough | |
| R05.3 | Chronic cough | |
| R05.8 | Other specified cough | |
| R06.02 | Shortness of breath | |
| R06.03 | Acute respiratory distress | |
| R06.2 | Wheezing | |
| R50.9 | Fever, unspecified | |
| R65.20 | Severe sepsis without septic shock | |
| R65.21 | Severe sepsis with septic shock | |
| R78.81 | Bacteremia | |
| T86.33 | Heart-lung transplant infection | |
| T86.812 | Lung transplant infection | |
| Z03.818 | Encounter for observation for suspected exposure to other biological agents ruled | |
| 700.000 | out | |
| Z20.822 | Contact with and (suspected) exposure to COVID-19 | |
| Z20.828 | Contact with and (suspected) exposure to other viral communicable diseases | |
| U07.1 | COVID-19 | |

Table 5: ICD-10 Diagnosis Codes that Support Medical Necessity for CPT codes in Table 2when Billed with a Diagnosis Code in Table 4

| ICD-10-CM | Description |
|---------------|---|
| Code | |
| B20 | Human immunodeficiency virus (HIV) disease |
| C46.0 | Kaposi's sarcoma of skin |
| C46.1 | Kaposi's sarcoma of soft tissue |
| C46.2 | Kaposi's sarcoma of palate |
| C46.3 | Kaposi's sarcoma of lymph nodes |
| C46.4 | Kaposi's sarcoma of gastrointestinal sites |
| C46.50 | Kaposi's sarcoma of unspecified lung |
| C46.51 | Kaposi's sarcoma of right lung |
| C46.52 | Kaposi's sarcoma of left lung |
| C46.7 | Kaposi's sarcoma of other sites |
| D57.01 | Hb-SS disease with acute chest syndrome |
| D61.09 | Other constitutional aplastic anemia |
| D61.1 | Drug-induced aplastic anemia |
| D61.2 | Aplastic anemia due to other external agents |
| D61.3 | Idiopathic aplastic anemia |
| D61.810 | Antineoplastic chemotherapy induced pancytopenia |
| D61.811 | Other drug-induced pancytopenia |
| D61.818 | Other pancytopenia |
| D61.82 | Myelophthisis |
| D61.89 | Other specified aplastic anemias & other bone marrow failure syndrome |
| D61.9 | Aplastic anemia, unspecified |
| D64.81 | Anemia due to antineoplastic chemotherapy |
| D64.89 | Other specified anemias |
| D70.0 | Congenital agranulocytosis |
| D70.1 | Agranulocytosis secondary to cancer chemotherapy |
| D70.2 | Other drug-induced agranulocytosis |
| D70.3 | Neutropenia due to infection |
| D70.4 | Cyclic neutropenia |
| D70.9 | Neutropenia, unspecified |
| D80.0 | Hereditary hypogammaglobulinemia |
| D80.1 | Nonfamilial hypogammaglobulinemia |
| D80.2 | Selective deficiency of immunoglobulin A (IgA) |
| D80.3 | Selective deficiency of immunoglobulin G (IgG) subclasses |
| D80.4 | Selective deficiency of immunoglobulin M (IgM) |
| D80.5 | Immunodeficiency with increased immunoglobulin M (IgM) |
| D80.6 | Antibody deficiency with near-normal immunoglobulins or with |
| D 00.0 | hyperimmunoglobulinemia |
| D80.8 | Other immunodeficiency with predominantly antibody defects, unspecified |
| D80.9 | Immunodeficiency with predominantly antibody defects, unspecified |
| D81.0 | Severe combined immunodeficiency (SCID) with reticular dysgenesis |
| D81.1 | Severe combined immunodeficiency (SCID) with low T- and B-cell numbers |
| D81.2 | Severe combined immunodeficiency (SCID) with low or normal B-cells |
| D81.30 | Adenosine deaminase deficiency, unspecified |
| D81.31 | Severe combined immunodeficiency due to adenosine deaminase deficiency |
| D81.32 | Adenosine deaminase 2 deficiency |

| D81.39 | Other adenosine deaminase deficiency | |
|---------|--|--|
| D81.4 | Nezelof's syndrome | |
| D81.5 | Purine nucleoside phosphorylase (PNP) deficiency | |
| D81.6 | Major histocompatibility complex class I deficiency | |
| D81.7 | Major histocompatibility complex class II deficiency | |
| D81.810 | Biotinidase deficiency | |
| D81.818 | Other biotin-dependent carboxylase deficiency | |
| D81.82 | Activated Phosphoinositide 3-kinase Delta Syndrome (APDS) | |
| D81.89 | Other combined immunodeficiencies | |
| D81.9 | Combined immunodeficiency, unspecified | |
| D82.0 | Wiskott-Aldrich syndrome | |
| D82.1 | Di George's syndrome | |
| D82.2 | Immunodeficiency with short-limbed stature | |
| D82.3 | Immunodeficiency following hereditary defective response to Epstein-Barr | |
| 202.0 | virus | |
| D82.4 | Hyperimmunoglobulin E (IgE) syndrome | |
| D82.8 | Immunodeficiency associated with other specified major defects | |
| D83.0 | Common variable immunodeficiency with predominant abnormalities to B- | |
| 20010 | cell | |
| | numbers & function | |
| D83.1 | Common variable immunodeficiency with predominant immunoregulatory T- | |
| | cell | |
| | disorders | |
| D83.2 | Common variable immunodeficiency with autoantibodies to B- or T-cells | |
| D83.8 | Other common variable immunodeficiencies | |
| D83.9 | Common variable immunodeficiency, unspecified | |
| D84.0 | Lymphocyte function antigen-1 (LFA-1) defect | |
| D84.1 | Defects in the complement system | |
| D84.821 | Immunodeficiency due to drugs | |
| D84.822 | Immunodeficiency due to external causes | |
| D84.9 | Immunodeficiency, unspecified | |
| D89.0 | Polyclonal hypergammaglobulinemia | |
| D89.1 | Cryoglobulinemia | |
| D89.3 | Immune reconstitution syndrome | |
| D89.41 | Monoclonal mast cell activation syndrome | |
| D89.42 | Idiopathic mast cell activation syndrome | |
| D89.43 | Secondary mast cell activation | |
| D89.44 | Hereditary alpha tryptasemia | |
| D89.49 | Other mast cell activation disorder | |
| D89.810 | Acute graft-versus-host disease | |
| D89.811 | Chronic graft-versus-host disease | |
| D89.812 | Acute on chronic graft-versus-host disease | |
| D89.813 | Graft-versus-host disease | |
| D89.82 | Autoimmune lymphoproliferative syndrome (ALPS) | |
| D89.89 | Other specified disorders involving the immune mechanism, not otherwise | |
| | classified | |
| E08.43 | Diabetes mellitus due to underlying condition with diabetic autonomic | |
| | (poly)neuropathy | |

| E10.43 | Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy | |
|----------|--|--|
| E11.43 | Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy | |
| E13.43 | Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy | |
| E84.0 | Cystic fibrosis with pulmonary manifestions | |
| J44.9 | Chronic obstructive pulmonary disease, unspecified | |
| J45.991 | Cough variant asthma | |
| J70.1 | Chronic and other pulmonary manifestations due to radiation | |
| J84.01 | Alveolar proteinosis | |
| J84.02 | Pulmonary alveolar microlithiasis | |
| J84.03 | Idiopathic pulmonary hemosiderosis | |
| J84.10 | Pulmonary fibrosis, unspecified | |
| J84.112 | Idiopathic pulmonary fibrosis | |
| J84.114 | Acute interstitial pneumonitis | |
| J84.170 | Interstitial lung disease with progressive fibrotic phenotype is diseases | |
| 001110 | classified | |
| | elsewhere | |
| J84.178 | Other interstitial pulmonary diseases with fibrosis in diseases classified | |
| | elsewhere | |
| J84.81 | Lymphangioleiomyomatosis | |
| J84.82 | Adult pulmonary Langerhans cell histiocytosis | |
| J84.89 | | |
| O98.711 | Human immunodeficiency virus (HIV) disease complicating pregnancy, first | |
| | trimester | |
| O98.712 | Human immunodeficiency virus (HIV) disease complicating pregnancy, second | |
| | trimester | |
| O98.713 | | |
| | trimester | |
| T80.82XS | Complication of immune effector cellular therapy, sequela | |
| Z51.11 | Encounter for antineoplastic chemotherapy | |
| Z92.850 | Personal history of Chimeric Antigen Receptor T-cell therapy | |
| Z92.858 | Personal history of other cellular therapy | |
| Z92.86 | Personal history of gene therapy | |
| Z94.0 | Kidney transplant status | |
| Z94.1 | Heart transplant status | |
| Z94.2 | Lung transplant status | |
| Z94.3 | Heart and lungs transplant status | |
| Z94.4 | Liver transplant status | |
| Z94.5 | Skin transplant status | |
| Z94.6 | Bone transplant status | |
| Z94.81 | Bone marrow transplant status | |
| Z94.82 | Intestine transplant status | |
| Z94.83 | Pancreas transplant status | |
| Z94.84 | Stem cells transplant status | |
| Z94.89 | Other transplanted organ and tissue status | |

Table 6: ICD-10 Diagnosis Codes that Support Medical Necessity for CPT codes in Table 2

| ICD-10-CM | Description |
|-----------|--|
| Code | |
| Z94.0 | Kidney transplant status |
| Z94.1 | Heart transplant status |
| Z94.2 | Lung transplant status |
| Z94.3 | Heart and lungs transplant status |
| Z94.4 | Liver transplant status |
| Z94.5 | Skin transplant status |
| Z94.6 | Bone transplant status |
| Z94.81 | Bone marrow transplant status |
| Z94.82 | Intestine transplant status |
| Z94.83 | Pancreas transplant status |
| Z94.84 | Stem cells transplant status |
| Z94.89 | Other transplanted organ and tissue status |

Definitions

N/A

Edit Sources

- I. Current Procedural Terminology (CPT) and associated publications and services.
- II. International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10).
- III. Healthcare Common Procedure Coding System (HCPCS).
- IV. The National Correct Coding Initiative (NCCI).
- V. Applicable Pennsylvania Medicaid Fee Schedule(s).
- VI. https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=38916
- VII. CMS LCD A58575

Attachments

N/A

Associated Policies

N/A

Policy History

| 05/2025 | Reimbursement Policy Committee Approval |
|---------|--|
| 04/2025 | Revised preamble |
| 04/2024 | Revised preamble |
| 08/2023 | Removal of policy implemented by Keystone First Community HealthChoices from Policy History section |
| 01/2023 | Template Revised |
| | Revised preamble |
| | Removal of Applicable Claim Types table |
| | Coding section renamed to Reimbursement Guidelines |

| Added Associated Policies section | |
|-----------------------------------|--|
|-----------------------------------|--|