

# Medical Necessity Requirements for Drug Screens

# Problem and Goal

## Problem

- ▶ The laboratory receives orders for drug screening with diagnoses that do not fully describe the patient's condition(s), or signs, and symptoms, and does not meet medical necessity.

## Goal

- ▶ Have the clinician provide diagnoses which fully describe the patient's condition(s) or signs and symptoms.
- ▶ To provide a general understanding of diagnosis codes required to meet medical necessity per Local Coverage Determination (LCD).

# General Regulations for Compliant Coding

- ▶ The ordering clinician is responsible for providing correct diagnosis code(s).
- ▶ The ordering clinician must always determine, for the specific date of service, the appropriate diagnosis code(s) based on the patient's condition(s) or signs and symptoms.
- ▶ The patient's condition(s) or signs and symptoms must be documented in the patient's medical record.
- ▶ ICD-10-CM codes in effect at the time of service are required by third-party payors to support the medical necessity of the test(s) and/or profile(s) ordered.
- ▶ Clinicians should submit all medically appropriate ICD-10-CM codes when ordering laboratory testing.

# Does The Diagnosis Meet Medical Necessity?

- ▶ Is the drug screen for pain management or addiction?
  - ▶ Long term use of opiate analgesic?
  - ▶ Ordered for substance use, abuse, dependence, intoxication, withdrawal, or in remission?
    - ▶ What substance?
    - ▶ Was there drug abuse counseling and surveillance of drug abuser?
    - ▶ Is the patient in a drug treatment program?
- ▶ Other long term drug therapy?
- ▶ Poisoning, underdosing, or adverse effects?
- ▶ What condition is being treated?
- ▶ Is the patient noncompliant with medical treatment and regime?

These are examples only and use of these codes are not encouraged unless they describe the patient's condition and are documented in the patient's chart.

# Validity Testing

- ▶ Urine drug testing CPT codes include specimen validity testing.
  - ▶ A urinalysis should never be ordered for the purposes of specimen validity testing.
  - ▶ If a urinalysis is ordered in addition to a urine drug screen, a diagnosis code to meet medical necessity is required.

# ICD-10-CM Coding Guidelines

- ▶ Review for conflicting diagnosis codes
  - ▶ There are rules that specify that some diagnosis codes cannot be used together.
    - ▶ Example: Z79.891, Long term (current) use of opiate analgesic should not be used with codes F11.2-, Opioid dependence or F11.9, Opioid use, unspecified.
- ▶ This is not an all-inclusive list of coding guidelines and instructions
- ▶ Please consult the ICD-10-CM coding book for further guidance.

<https://www.cms.gov/Medicare/Coding/ICD10>

# CMS Local Coverage Determination (LCD)

- ▶ Review Local Coverage Determination (LCD)
  - ▶ Provides diagnosis requirements to meet medical necessity
  - ▶ Frequency rules may apply
  - ▶ Provides guidance on when to obtain an Advanced Beneficiary Notice (ABN) of Noncoverage
    - ▶ Applicable to Original Medicare and Medicare Railroad beneficiaries

[https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=56645&ver=23&name=331\\*1&UpdatePeriod=905&bc=AEAABAAAAAA&](https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=56645&ver=23&name=331*1&UpdatePeriod=905&bc=AEAABAAAAAA&)