

Part B Insider (Multispecialty) Coding Alert

PATHOLOGY: Keep Alert--No Pathologist, No Pay For Array Testing Codes

New molecular probe codes sow confusion among providers

If you don't have a pathologist supervising your molecular probe testing, you could receive just \$5.60 instead of around \$320.

That's because the CPT definition of new codes 88384-88386, for "array-based evaluation of multiple molecular probes," requires a pathologist's involvement in the procedure, from beginning to end. Many facilities have a PhD supervise these procedures instead, and a PhD is only eligible to bill for the technical component of interpretation [code 83912](#), which pays \$5.60.

Document pathologist involvement: Your pathologist must do more than just interpret the results of the tests, says **Diana Voorhees**, principal in **DV & Associates** in Salt Lake City. The pathologist must review any patient information or slides to decide on gene dosage and whether to continue with the testing. The pathologist should also review controls to make sure results are valid--and verify those results.

Confusion: These new codes took effect in January, but they're still sowing confusion among providers, says Joan Logue, principal with Health Systems Concepts in Longwood, FL. "It's just not clear as to what is covered under there," she says. Providers want to use these codes for serum tests, but it's not clear if Medicare will cover them for that use.

Clarification: You can use the codes for serum testing and other areas, as long as you pathologist is involved and employs molecular probes using array-based technology, says Voorhees. The codes are in the surgical pathology section, because the **American Medical Association** thought you'd use them mostly for cytology specimens, but they're not limited to surgical pathology. "There are all kinds of applicability for array testing," she adds.

But there are limits, Voorhees warns. If you use array-based probes that are specifically listed in the infectious disease section of the microbiology chapter, then you have to use those codes instead, she says.

The three codes only cover 11 to 50 probes (88384), 51 to 250 probes (88385), and 251 to 500 probes (88386). Many procedures require more than 500 probes, so it's likely that the AMA will introduce new codes next year to cover additional probes, says Voorhees.

Important: Don't use these codes unless you're sure you're using an array-based technology and you have at least 11 probes, Voorhees warns.