

December 15, 2025**Re: Annual Physician Letter**

UnityPoint Health (UPH) Finley Hospital Laboratory complies with all guidelines set forth by the Federal Office of Inspector General (OIG), the Center for Medicare and Medicaid Services (CMS) and the Department of Health and Human Services (DHHS). These guidelines require the laboratory to send annual written notification to providers outlining policies and procedures for the ordering and billing of tests for Medicare beneficiaries.

ORDERING LABORATORY TESTING

42 CFR 410.32 states "All diagnostic laboratory tests must be ordered by the physician who is treating the beneficiary and who uses the result in the management of the beneficiary's specific medical problem". 42 CFR 410.33 states "The order must specify the diagnosis or other basis for the testing".

MEDICAL NECESSITY

Section 1862(a)(1) of the Social Security Act of 1967 state that "Medicare will only pay for those tests it determines to be reasonable and necessary for the diagnosis or treatment of an illness or injury...".

Medicare does not pay for routine screening tests. A routine screening test is defined as one requested in the absence of any signs or symptoms of disease. The following screening tests are exceptions to the rule and are covered with specific frequency limits: Pap, PSA, occult blood, glucose, and lipid panel.

The Advanced Beneficiary Notice of Non-coverage (ABN) should be used whenever tests are ordered with a diagnosis code that does not meet medical necessity guidelines as set by a state (Local Coverage Determination-LCD) or federal (National Coverage Determination-NCD) policy and/or when the test has a frequency limit. When specimens are collected in your office and referred to UPH Finley Laboratory, it is your responsibility to obtain the ABN and either send a copy to the lab with the specimen or notify the lab that an ABN is on file in your office. If Medicare denies payment due to medical necessity or because an appropriate ICD-10 code was used, and an ABN is not on file, it is UPH Finley's policy to send your office a follow-up form requesting the appropriate billing info.

STANDING ORDERS

UPH Finley Laboratory discourages the use of standing orders. For those situations where a standing order may be appropriate, i.e., long term use of high-risk medication requiring frequent monitoring, a Standing Order General Policy has been developed. Finley staff will review all standing orders every six months and physicians will be asked to review the current standing order and indicate in writing if the standing order is to be cancelled or a new standing order be generated. All standing orders must be accompanied with an appropriate ICD-10 diagnosis code.

PRIOR AUTHORIZATION

Many payers are now requiring prior authorization (PA) before testing will be reimbursed. Insurance payors continue to increase oversight and restrict access by requiring pre-authorization for certain lab tests, including but certainly not limited to any Genetic markers, Cytogenetics testing, Drug testing, Allergy & Celiac testing, etc. Please work with your patient to review their payor-specific preauthorization requirements. Any preauthorization paperwork must be completed by the ordering provider's office prior to submission of any lab orders and/or specimens. Please include the 'preauth' number on the lab order, along with any related documentation.

If preauthorization is required by the payor but is not done by the ordering provider prior to submission, the laboratory may delay or suspend processing until the required authorization can be completed, and failure to secure the required authorizations may result in the client being billed back for the testing services.

PANELS

All panels offered by the UPH Finley Laboratory are Medicare designated panels. Custom panels are not offered.

Medicare will only pay for Organ and Disease Panels if all tests in the panel are reasonable and medically necessary; multiple ICD-10 codes should be considered when ordering panels.

REFLEX TESTING

Reflex testing occurs when initial test results are positive or outside normal parameters and indicate that a second related test is medically appropriate. Finley will bill Medicare for the reflex testing using the CPT code listed.

PANELS PERFORMED AT FINLEY	CPT
Basic Metabolic Panel (BMP) CO ₂ , Calcium, Chloride, Creatinine, Glucose, Potassium, Sodium, Urea Nitrogen (BUN), eGFR, calculated anion gap Note: Glucose has an LCD/NCD Policy	80047
Electrolyte Panel Sodium, Potassium, Chloride, CO ₂	80048
Comprehensive Metabolic Panel (CMP) Albumin, ALT, AST, Bilirubin Total, CO ₂ , Calcium, Chloride, Creatinine, Glucose, Alkaline Phosphatase, Total Protein, Urea Nitrogen (BUN), Sodium, Potassium, eGFR, calculated anion gap, Albumin/Globulin ratio (A/G ratio) Note: Glucose has an LCD/NCD policy.	80051
Lipid Panel Cholesterol, Triglycerides, HDL, Calculated LDL	80061
Hepatic Function Panel Albumin, ALT, AST, Bilirubin Total & Direct, Alkaline Phosphatase, Total Protein	80076
Renal Function Panel Albumin, Calcium, CO ₂ , Chloride, Glucose, Phosphorus, Potassium, Sodium, Urea Nitrogen (BUN), calculated anion gap Note: Glucose has an LCD/NCD policy.	80069
Hepatitis Panel, Acute Hepatitis A Antibody IgM, Hepatitis C Virus Antibody, Hepatitis B Surface Antigen, Hepatitis B Core Antibody IgM	80074
Hepatitis Panel, Chronic Unknown Hepatitis B Core Total Antibodies, Hepatitis B Surface Antigen, Hepatitis B Surface Antibody, Hepatitis C Virus Antibody	86704, 86706, 87340, 86803
REFLEX TESTS PERFORMED AT FINLEY	CPT
MRSA Nasal Screen by PCR Reflexes if indeterminate to: MRSA Nasal Culture	86038 87641
Lipid Panel Reflexes if triglyceride is ≥400 to: LDL, Direct	80061 83721
Antibody Screen Reflexes if positive to: Antibody ID. If ordered as Group, Type, Screen then reflexes to 2 unit crossmatch Reflexes if first time positive to: Antibody ID and Antigen Typing	86850 86870 86870/86905

RH Immune Globulin Workup – Fetal Screen Reflexes to ABO/Rh on mother (if not already done) Reflexes if positive to: Fetal Hemoglobin (KB) Stain Reflexes if no history to: ABO/Rh type	85461 86900/86901 85460 86900/86901
ABO type / Rh type by Gel Reflexes if there is no historical type to: ABO/Rh type verification by Tube method	86900/86901 86900/86901
Cord Blood Profile Reflexes to Weak D testing if Rh is Negative.	86900 86901 86880
Blood Bank to hold Reflexes if no historical type to: ABO/Rh type	36415 86900/86901
Group B Strep by PCR Reflexes if indeterminate to: Group B Strep Culture	87653 87081
Clostridium difficile by PCR Reflexes if presumptive positive or indeterminate: Clostridium difficile toxin A & B, by EIA	87493 87324
Blood Culture Reflexes it positive to: Blood Culture Identification Panel by PCR	87040 87154
TSH Cascade Reflexes if outside the reference range to: Free T4	84443 84439
Syphilis IgG/IgM with Reflex Reflexes if positive or equivocal to RPR, Qual and possibly Treponema Pallidum Ab by TPPA	87680 86780 86593
Hepatitis B Surface Antigen Reflexes if HBsAg Index Value is >1.0 but <50.0 to: HBsAg Confirmation by neutralization	87340 87341
Hepatitis C Antibody Reflexes if positive or equivocal to: HCV confirmation by Reverse Transcription PCR	86803 86804
HIV Antibody Screen (HIV Ab) Reflexes if HIV Ab Index Value is ≥1.0 to: HIV confirmation & differentiation of HIV-1/HIV-2	86703 86689
Urinalysis with Reflexive Testing Reflexes to a microscopic exam if: Clarity is cloudy/turbid OR Positive for blood (Trace or greater) OR Protein ≥30 mg/dL OR Nitrite positive OR Leukocyte esterase positive Reflexes to a urine culture if: WBC >10/hpf	81000 81001 87088

REFERENCE LABORATORY REFLEX TESTING

Testing not performed within UPH Finley Hospital Laboratory and referred to an outside reference laboratory may perform reflex testing as part of their testing protocol. Those tests are not listed in this document; however, we have included links to their online test catalogs and/or reflex testing documents. Consult the laboratory if questions or problems arise from reflex testing at reference laboratories.

Reference Laboratory	Links
UnityPoint Health Cedar Rapids St. Luke's Laboratory	
UnityPoint Health Des Moines PathLabs	
Mayo Medical Laboratories	
United States Drug Testing Lab (USDTL)	
NeoGenomics Laboratories	

The full UPH Finley Hospital Laboratory test menu is located at <https://unitypointfinley.testcatalog.org/>. This site includes information on the approved panels and reflex tests previously mentioned as well as Current Procedural Terminology (CPT) codes.

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