



# Cell Culture and Fluorescent Tests

QUIDEL®



## Reimbursement Manual

# Contents

<b>Introduction .....</b>	<b>3</b>
<b>Respiratory Testing Solutions .....</b>	<b>4</b>
Respiratory Testing Coding Roadmap and Descriptors .....	4
D <sup>3</sup> FastPoint L-DFA Respiratory Virus Identification Kit.....	5
D <sup>3</sup> FastPoint L-DFA Influenza A/Influenza B Virus Identification Kit .....	6
D <sup>3</sup> FastPoint L-DFA RSV/MPV Identification Kit .....	7
D <sup>3</sup> Ultra DFA Respiratory Virus Screening and ID Kit .....	8
D <sup>3</sup> DFA Metapneumovirus Identification Kit .....	10
D <sup>3</sup> Duet DFA Influenza A/Respiratory Virus Screening Kit .....	11
D <sup>3</sup> Duet DFA RSV/Respiratory Virus Screening Kit .....	13
<b>Thyroid Testing Solutions.....</b>	<b>15</b>
Thyretain TSI Reporter BioAssay .....	15
<b>Herpes Family Testing Solutions .....</b>	<b>16</b>
Herpes Family Testing Coding Roadmap and Descriptors .....	16
ELVIS HSV ID Test System and ELVIS HSV ID and D <sup>3</sup> System Typing Test.....	17
D <sup>3</sup> DFA Herpes Simplex Virus Identification Kit .....	19
D <sup>3</sup> DFA Herpes Simplex Virus Identification and Typing Kit.....	20
D <sup>3</sup> DFA Cytomegalovirus Immediate Early Antigen Identification Kit.....	21
D <sup>3</sup> DFA Varicella-zoster Virus Identification Kit .....	22
<b>Enterovirus Testing Solutions.....</b>	<b>23</b>
Enterovirus Testing Coding Roadmap and Descriptors .....	23
D <sup>3</sup> IFA Enterovirus Identification Kit .....	24
<b>Chlamydia Testing Solutions .....</b>	<b>25</b>
Chlamydia Testing Coding Roadmap and Descriptors.....	25
D <sup>3</sup> DFA Chlamydiae Culture Confirmation Kit.....	26

## Introduction

Thank you for choosing Quidel for your testing needs.

This manual has been developed as a coding reference guide for Quidel cell culture and fluorescent test kits. Please note that all coding scenarios contained herein are specific to those methods included in respective product inserts. As payer reimbursement policies often differ and are subject to change, it is strongly recommended that you consult with each contracted insurance carrier on a regular basis to confirm respective coding, coverage, and payment guidelines prior to submitting claims.

The office of Inspector General (OIG) of the Department of Health and Human Services (HHS) and other Federal agencies have emphasized the importance of voluntarily developed and implemented compliance plans for clinical laboratories, regardless of size. Specific to reimbursement, it is strongly recommended that customers review and implement the medical necessity and billing compliance plan elements developed in the OIG Model Compliance Plan for Clinical Laboratories. This document can be viewed online by visiting:

**<http://oig.hhs.gov/fraud/docs/complianceguidance/cpcl.html>**

CMS developed the National Correct Coding Initiative (NCCI) and Medically Unlikely Edits (MUEs) to promote national correct coding methodologies and to control improper coding leading to inappropriate payment. Regarding reimbursement for same day testing and/or confirmation testing, it is strongly recommended that customers review and understand these edits, found online at:

**<http://www.cms.gov/NationalCorrectCodInitEd/>**

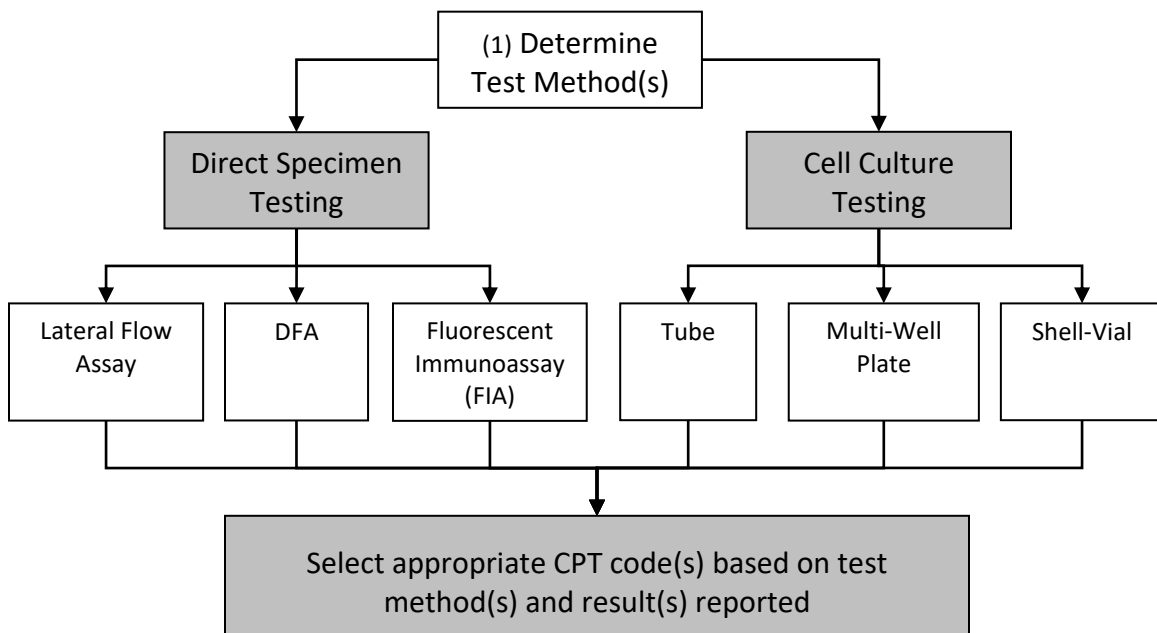
For reimbursement support, please contact CodeMap at 312.291.8408  
or e-mail [quidel@codemap.com](mailto:quidel@codemap.com)

This information is being provided as a reference, for informational purposes only, with no expressed or implied warranty and does not purport to provide legal or certified coding advice. ***It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT® and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).*** Any review, retransmission, dissemination or other use of this information by persons or entities other than the intended recipient is prohibited.

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# Respiratory Testing Solutions

## Respiratory Testing Coding Roadmap



## Respiratory Testing CPT Code Descriptors (Reference)

CPT	Description
87140	Culture, typing; immunofluorescent method, each antiserum
87252	Virus isolation; tissue culture inoculation, observation, and presumptive identification by cytopathic effect
87253	Virus isolation; tissue culture, additional studies or definitive identification (eg, Heme absorption, neutralization, immunofluorescence stain), each isolate
87254	Virus isolation; centrifuge enhanced (shell vial) technique, includes identification with immunofluorescence stain, each virus
87260	Infectious agent antigen detection by immunofluorescent technique; adenovirus
87275	Infectious agent antigen detection by immunofluorescent technique; influenza B virus
87276	Infectious agent antigen detection by immunofluorescent technique; influenza A virus
87279	Infectious agent antigen detection by immunofluorescent technique; Parainfluenza virus, each type
87280	Infectious agent antigen detection by immunofluorescent technique; respiratory syncytial virus
87299	Infectious agent antigen detection by immunofluorescent technique; not otherwise specified, each organism
87300	Infectious agent antigen detection by immunofluorescent technique, polyvalent for multiple organisms, each polyvalent antiserum
87804	Infectious agent antigen detection by immunoassay with direct optical observation; Influenza
87807	Infectious agent antigen detection by immunoassay with direct optical observation; respiratory syncytial virus
87880	Infectious agent antigen detection by immunoassay with direct optical observation; Streptococcus, group A

## D<sup>3</sup>® FastPoint® L-DFA Respiratory Virus Identification Kit

### **Coding for Direct Specimen Testing<sup>1</sup>**

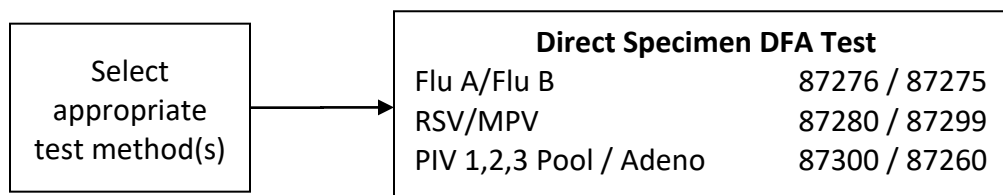
Description	CPT
Influenza A	87276
Influenza B	87275
Respiratory Syncytial Virus (RSV)	87280
Human Metapneumovirus (MPV)	87299
Parainfluenza Pool <sup>2</sup>	87300
Adenovirus	87260

It is recommended that specimens found to be negative for influenza A virus, influenza B virus, RSV, adenovirus, or parainfluenza viruses after examination of the direct specimen result be confirmed by cell culture. Specimens found to be negative for MPV after examination of the direct specimen results should be confirmed by an FDA-cleared human metapneumovirus molecular assay.<sup>3</sup>

### **Coding for Cell Culture Testing**

Appropriate screening and ID kits,<sup>4</sup> as well as cell lines for culture confirmation of negative results may also be purchased from Quidel/Diagnostic Hybrids.

### **Coding Diagram**



<sup>1</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

<sup>2</sup> Parainfluenza Pool can be typed (PIV 1, PIV 2, PIV 3) using the D<sup>3</sup> Ultra™ DFA Parainfluenza Reagent Set.

<sup>3</sup> See product insert.

<sup>4</sup> D<sup>3</sup> Ultra DFA Respiratory Virus Screening and ID Kit or the D<sup>3</sup> Duet DFA Influenza A/Respiratory Virus Screening Kit.

## D<sup>3</sup> FastPoint L-DFA Influenza A/Influenza B Virus Identification Kit

### ***Coding for Direct Specimen Testing<sup>5</sup>***

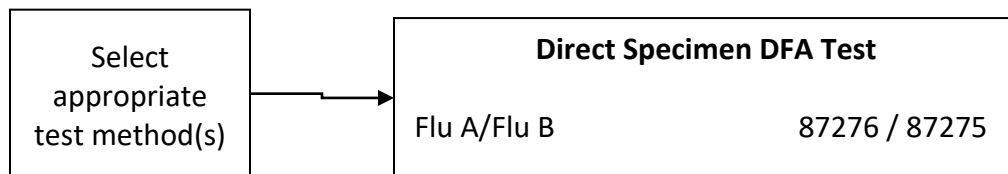
Description	CPT
Influenza A	87276
Influenza B	87275

It is recommended that specimens found to be negative for influenza A or influenza B virus after examination of the direct specimen result be confirmed by cell culture.<sup>6</sup>

### ***Coding for Cell Culture Testing***

Appropriate screening and ID kits,<sup>7</sup> as well as cell lines for culture confirmation of negative results may also be purchased from Quidel/Diagnostic Hybrids.

### ***Coding Diagram***



<sup>5</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

<sup>6</sup> See product insert.

<sup>7</sup> D<sup>3</sup> Ultra DFA Respiratory Virus Screening and ID Kit or the D<sup>3</sup> Duet DFA Influenza A/Respiratory Virus Screening Kit.

## D<sup>3</sup> FastPoint L-DFA RSV/MPV Identification Kit

### Coding for Direct Specimen Testing<sup>8</sup>

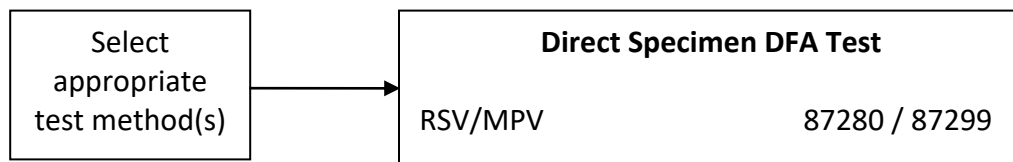
Description	CPT
Respiratory Syncytial Virus (RSV)	87280
Human Metapneumovirus (MPV)	87299

It is recommended that specimens found to be negative for RSV after examination of the direct specimen result be confirmed by cell culture. Specimens found to be negative for MPV after examination of the direct specimen results should be confirmed by an FDA-cleared MPV molecular assay.<sup>9</sup>

### Coding for Cell Culture Testing

Appropriate screening and ID kits,<sup>10</sup> as well as cell lines for culture confirmation of negative results may also be purchased from Quidel/Diagnostic Hybrids.

### Coding Diagram



<sup>8</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

<sup>9</sup> See product insert.

<sup>10</sup> D<sup>3</sup> Ultra™ DFA Respiratory Virus Screening and ID Kit or the D<sup>3</sup> Duet™ DFA Influenza A/Respiratory Virus Screening Kit.

## D<sup>3</sup> Ultra DFA Respiratory Virus Screening and ID Kit

### Coding for Direct Specimen Testing<sup>11</sup>

Description	CPT <sup>12,13</sup>
Respiratory Virus Screen <sup>13</sup>	87300
Influenza A	87276
Influenza B	87275
Respiratory Syncytial Virus (RSV)	87280
Adenovirus	87260
Parainfluenza 1 (PIV 1)	87279
Parainfluenza 2 (PIV 2)	87279-59
Parainfluenza 3 (PIV 3)	87279-59

It is recommended that specimens found to be negative for influenza A virus, influenza B virus, RSV, adenovirus, and parainfluenza viruses after examination of the direct specimen result be confirmed by cell culture.<sup>14</sup>

### Coding for Cell Culture<sup>11</sup>

#### (Alternative to Direct Specimen Testing or for Confirmation of Negatives)

Appropriate cell lines for initial culture testing or for results found to be negative after examination of the direct specimen (DFA or lateral flow test) may also be purchased from Diagnostic Hybrids.

Cell Culture Method	CPT	Modifier (if necessary) <sup>12</sup>
<i>Tube</i>	87252	Not Applicable
<i>Multi-Well Plate</i>	87254	59
<i>Shell-Vial</i>	87254	59

<sup>11</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

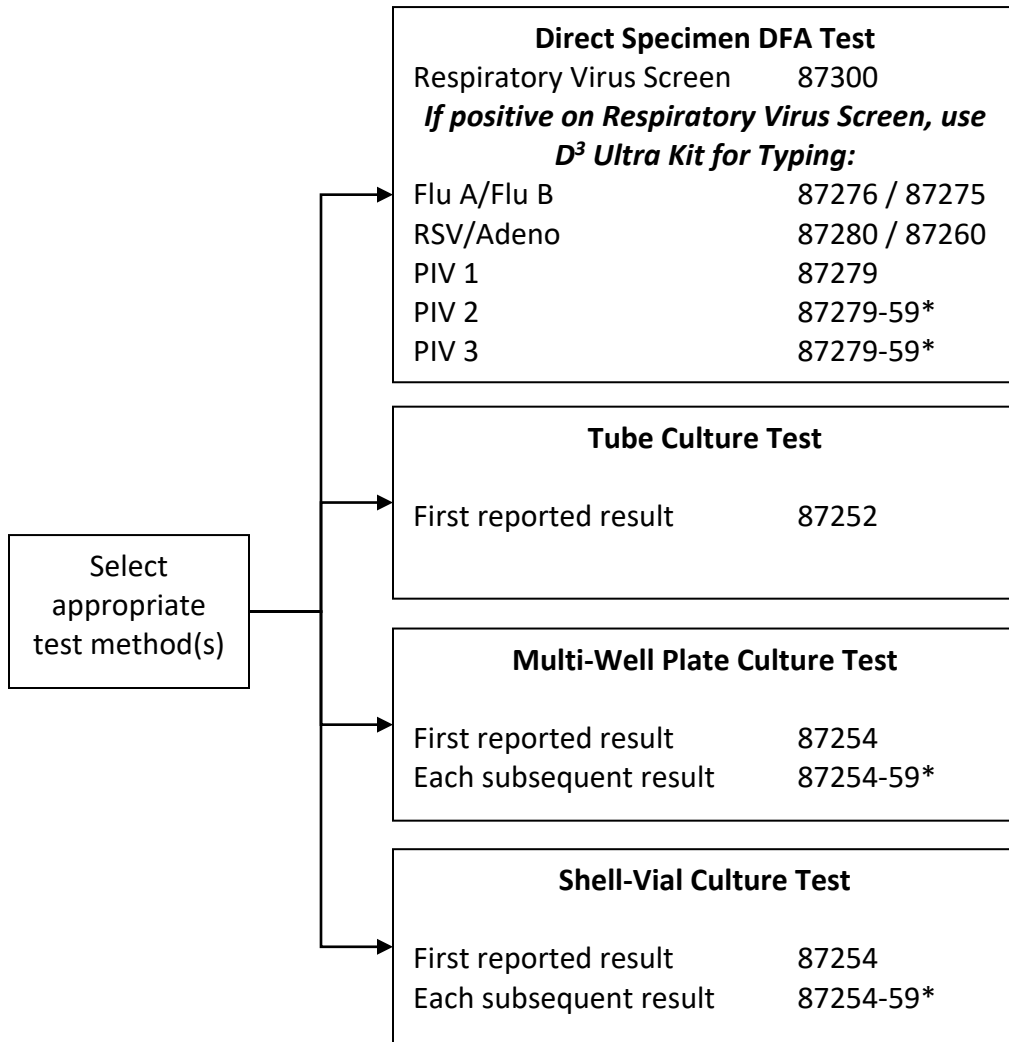
<sup>12</sup> For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

<sup>13</sup> Respiratory Virus Screen can be typed (Flu A, Flu B, RSV, Adeno, PIV 1, PIV 2, PIV 3) using the D<sup>3</sup> Ultra DFA Respiratory Virus Screening and ID Kit.

<sup>14</sup> See product insert.



**Coding Diagram**



\* For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

## D<sup>3</sup> DFA Metapneumovirus Identification Kit

### Coding for Direct Specimen Testing<sup>15</sup>

Description	CPT
Human Metapneumovirus (MPV)	87299

Specimens found to be negative for MPV after examination should be confirmed by an FDA-cleared MPV molecular assay.

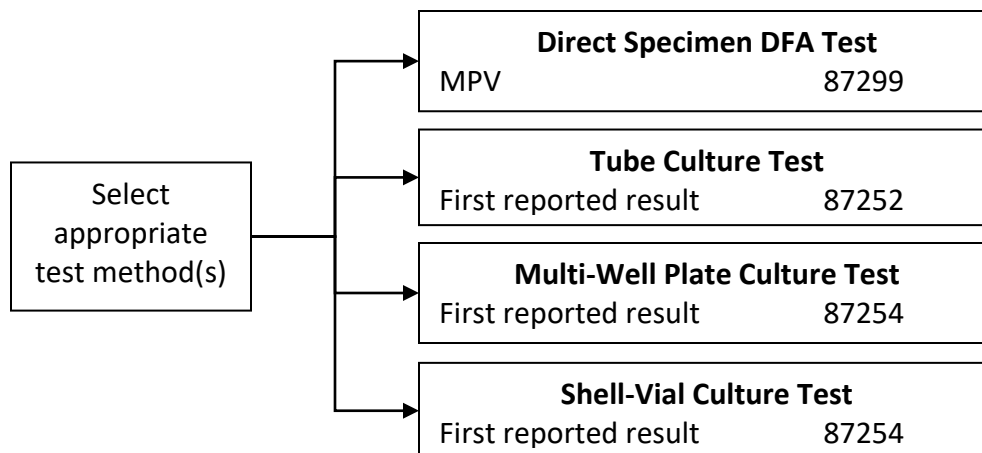
### Coding for Cell Culture<sup>15</sup>

#### (Alternative to Direct Specimen Testing or for Confirmation of Negatives)

Appropriate cell lines for initial culture testing or for results found to be negative after examination of the direct specimen (DFA or lateral flow) may also be purchased from Diagnostic Hybrids.

Cell Culture Method	CPT	Modifier (if necessary) <sup>16</sup>
<i>Tube</i>	87252	Not Applicable
<i>Multi-Well Plate</i>	87254	Not Applicable
<i>Shell-Vial</i>	87254	Not Applicable

### Coding Diagram



\* For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

<sup>15</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

<sup>16</sup> For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

## D<sup>3</sup> Duet DFA Influenza A/Respiratory Virus Screening Kit

### Coding for Direct Specimen Testing<sup>17</sup>

Description	CPT <sup>18,19</sup>
Influenza A	87276
Respiratory Virus Screen <sup>19</sup>	87300
Influenza B	87275
Respiratory Syncytial Virus (RSV)	87280
Adenovirus	87260
Parainfluenza 1 (PIV 1)	87279
Parainfluenza 2 (PIV 2)	87279-59
Parainfluenza 3 (PIV 3)	87279-59

It is recommended that specimens found to be negative for influenza A virus, influenza B virus, RSV, adenovirus, and parainfluenza viruses after examination of the direct specimen result be confirmed by cell culture.<sup>20</sup>

### Coding for Cell Culture<sup>17</sup>

#### (Alternative to Direct Specimen Testing or for Confirmation of Negatives)

Appropriate cell lines for initial culture testing or for results found to be negative after examination of the direct specimen (DFA or lateral flow) may also be purchased from Diagnostic Hybrids.

Cell Culture Method	CPT	Modifier (if necessary) <sup>18</sup>
<i>Tube</i>	87252	Not Applicable
<i>Multi-Well Plate</i>	87254	59
<i>Shell-Vial</i>	87254	59

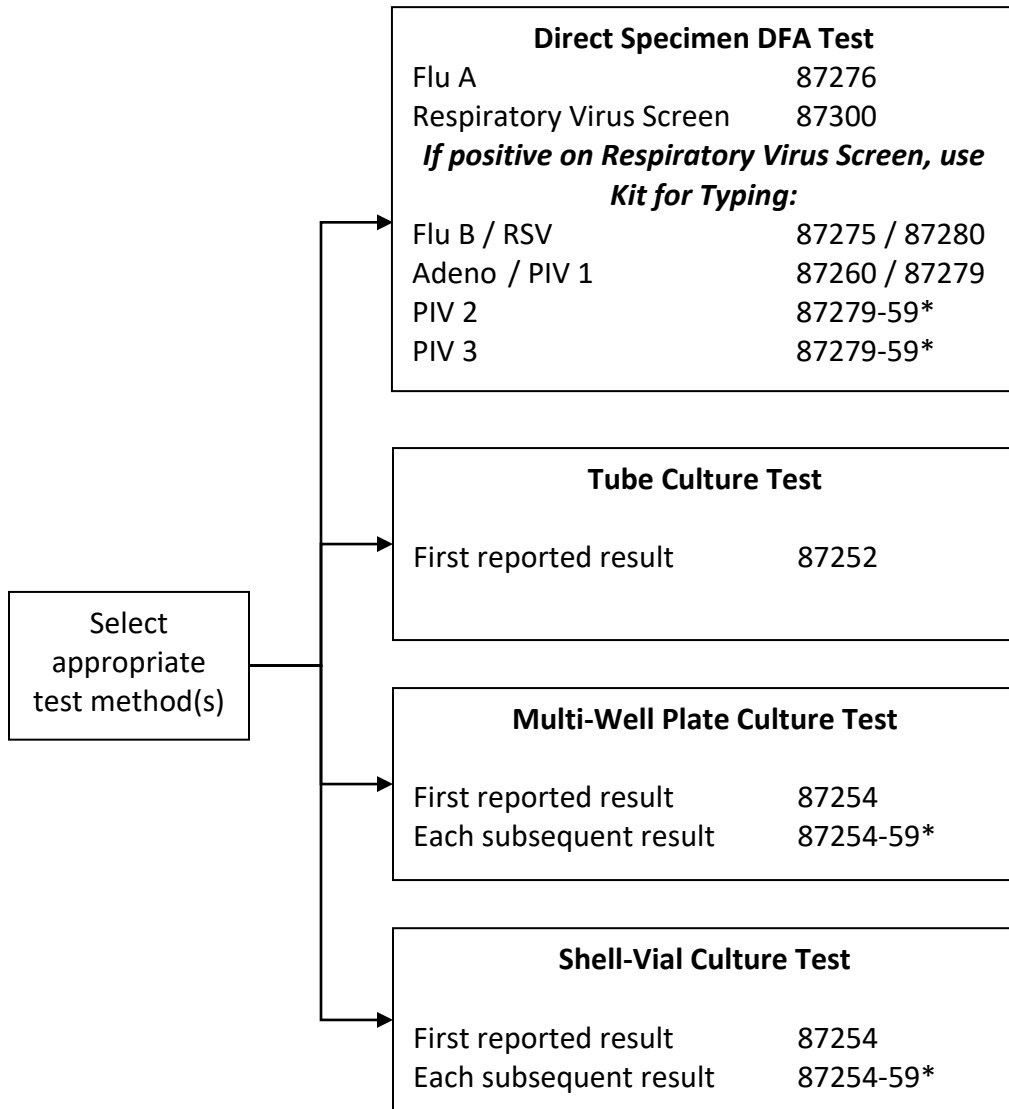
<sup>17</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

<sup>18</sup> For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

<sup>19</sup> Respiratory Virus Screen can be typed (Flu B, RSV, Adeno, PIV 1, PIV 2, PIV 3) using this kit.

<sup>20</sup> See product insert.

**Coding Diagram**



\* For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

## D<sup>3</sup> Duet DFA RSV/Respiratory Virus Screening Kit

### **Coding for Direct Specimen Testing<sup>21</sup>**

Description	CPT <sup>22,23</sup>
Respiratory Syncytial Virus (RSV)	87280
Respiratory Virus Screen <sup>23</sup>	87300
Influenza A	87276
Influenza B	87275
Adenovirus	87260
Parainfluenza 1 (PIV 1)	87279
Parainfluenza 2 (PIV 2)	87279-59
Parainfluenza 3 (PIV 3)	87279-59

It is recommended that specimens found to be negative for RSV, influenza A virus, influenza B virus, adenovirus, and parainfluenza viruses after examination of the direct specimen result be confirmed by cell culture.<sup>24</sup>

### **Coding for Cell Culture<sup>21</sup>**

#### **(Alternative to Direct Specimen Testing or for Confirmation of Negatives)**

Appropriate cell lines for initial culture testing or for results found to be negative after examination of the direct specimen (DFA or lateral flow) may also be purchased from Diagnostic Hybrids.

Cell Culture Method	CPT	Modifier (if necessary) <sup>22</sup>
<i>Tube</i>	87252	Not Applicable
<i>Multi-Well Plate</i>	87254	59
<i>Shell-Vial</i>	87254	59

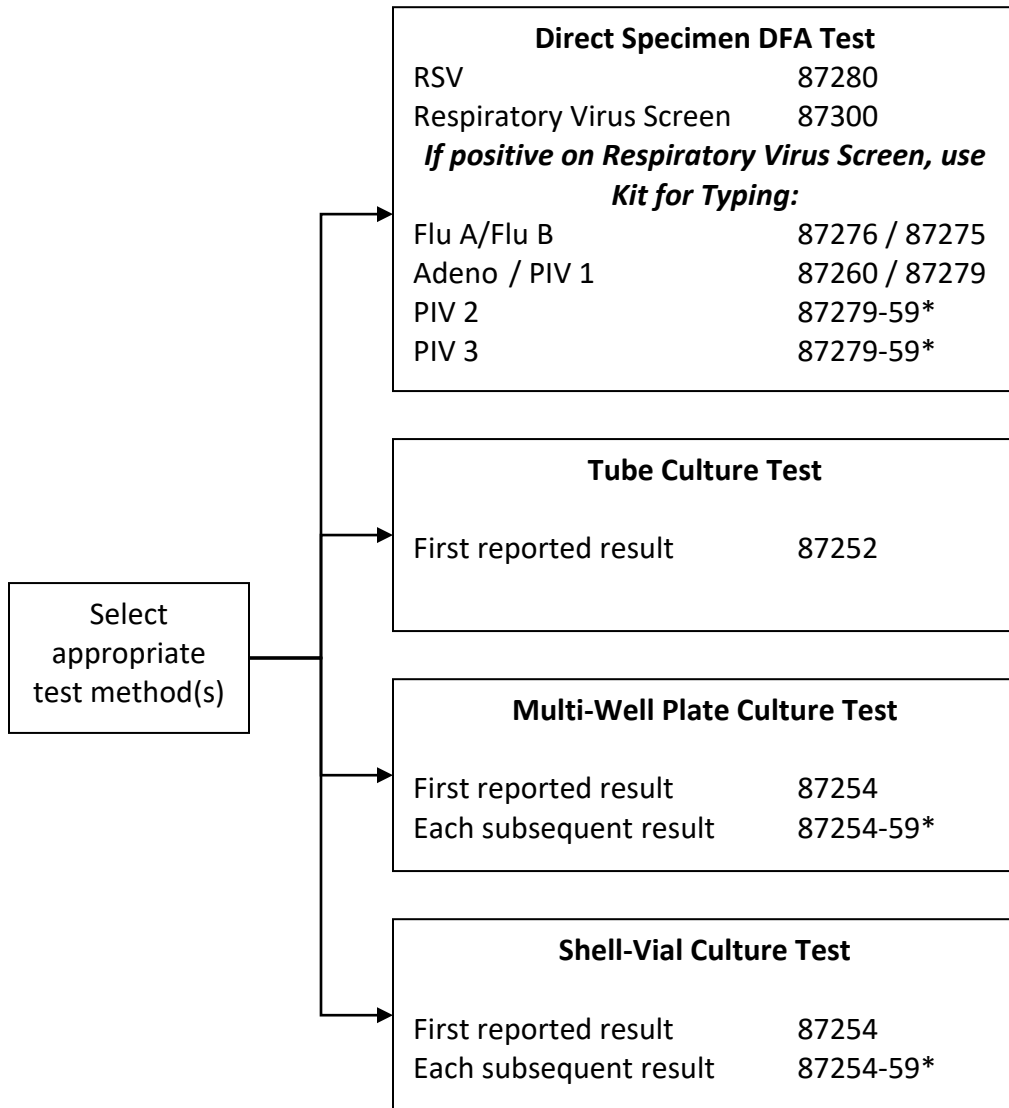
<sup>21</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

<sup>22</sup> For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

<sup>23</sup> Respiratory Virus Screen can be typed (Flu A, Flu B, Adeno, PIV 1, PIV 2, PIV 3) using this kit.

<sup>24</sup> See product insert.

**Coding Diagram**



\* For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

# Thyroid Testing Solutions

## Thyretain® TSI Reporter BioAssay

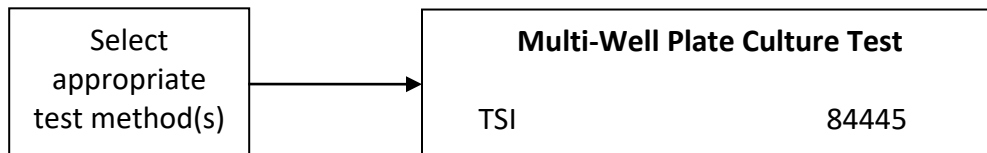
### Thyroid Testing CPT Code Descriptor (Reference)

CPT	Description
84445	Thyroid stimulating immune globulins (TSI)

### Coding<sup>25</sup>

Description	CPT
TSI	84445

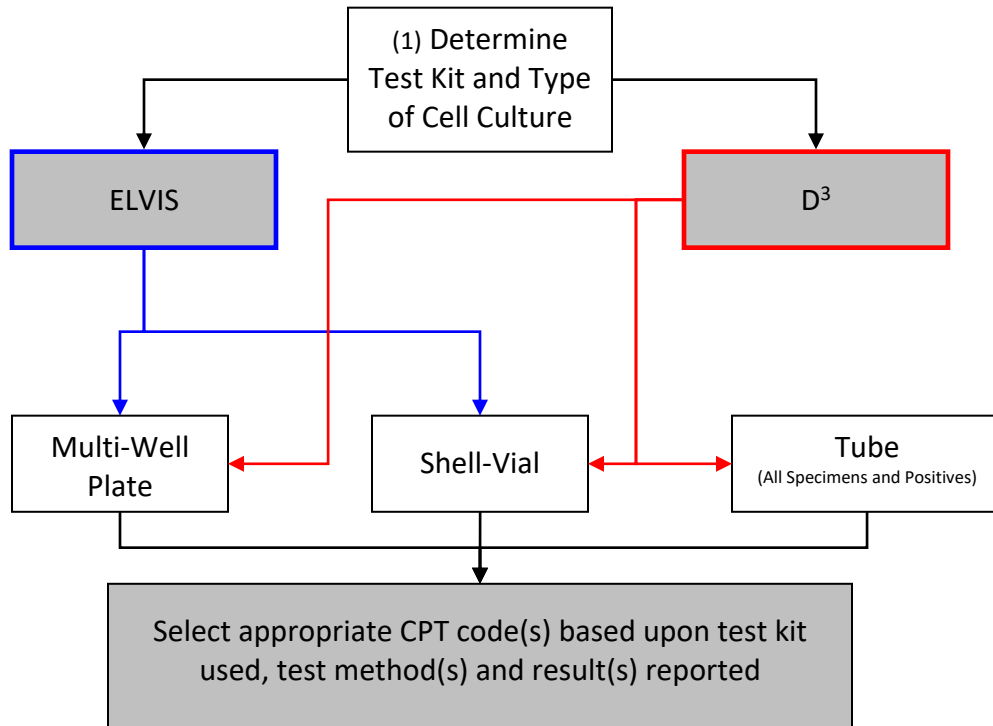
### Coding Diagram



<sup>25</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

# Herpes Family Testing Solutions

## Herpes Family Testing Coding Roadmap



## Herpes Family Testing CPT Code Descriptors (Reference)

CPT	Description
87140	Culture, typing; immunofluorescent method, each antiserum
87252	Virus isolation; tissue culture inoculation, observation, and presumptive identification by cytopathic effect
87254	Virus isolation; centrifuge enhanced (shell vial) technique, includes identification with immunofluorescence stain, each virus
87255	Virus isolation; including identification by non-immunologic method, other than by cytopathic effect (eg, virus specific enzymatic activity)



## ELVIS® HSV ID Test System and ELVIS HSV ID and D<sup>3</sup> Typing Test System

### Coding for Herpes Simplex Virus Identification (ELVIS)<sup>26</sup>

Cell Culture Method	CPT
<i>Tube</i>	Not Applicable
<i>Multi-Well Plate</i>	87255
<i>Shell-Vial</i>	87255

### Coding for Herpes Simplex Virus Typing (ELVIS)<sup>26</sup>

Description	CPT	Modifier (if necessary) <sup>27</sup>
HSV-2	87140	Not Applicable

Blue-cell-positive monolayers with no HSV-2 fluorescence must be stained with appropriate solution to confirm detection of HSV-1.<sup>28</sup>

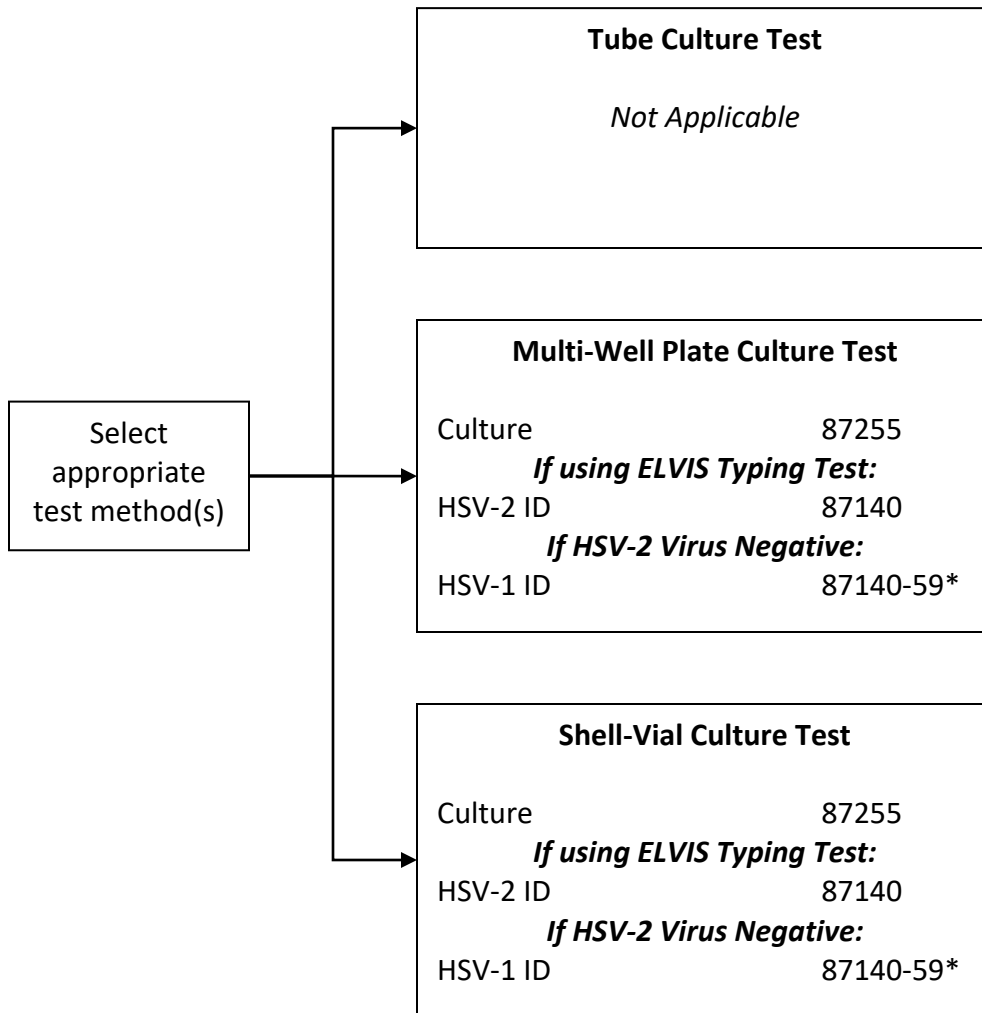
Description	CPT	Modifier (if necessary) <sup>56</sup>
HSV-1	87140	59

<sup>26</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

<sup>27</sup> For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

<sup>28</sup> See product insert.

**Coding Diagram**



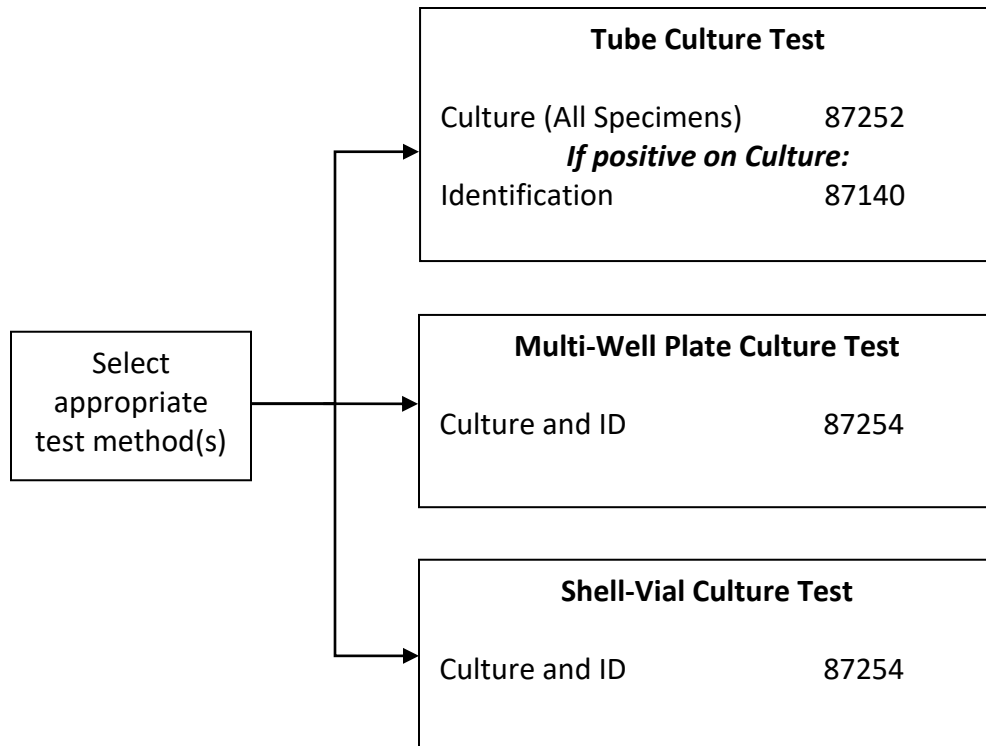
\* For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

## D<sup>3</sup> DFA Herpes Simplex Virus Identification Kit

### Coding for Herpes Simplex Virus Identification (D<sup>3</sup>)<sup>29</sup>

Cell Culture Method	CPT
<i>Tube: All Specimens</i>	87252
<i>Tube: Positives</i>	87140
<i>Multi-Well Plate</i>	87254
<i>Shell-Vial</i>	87254

### Coding Diagram



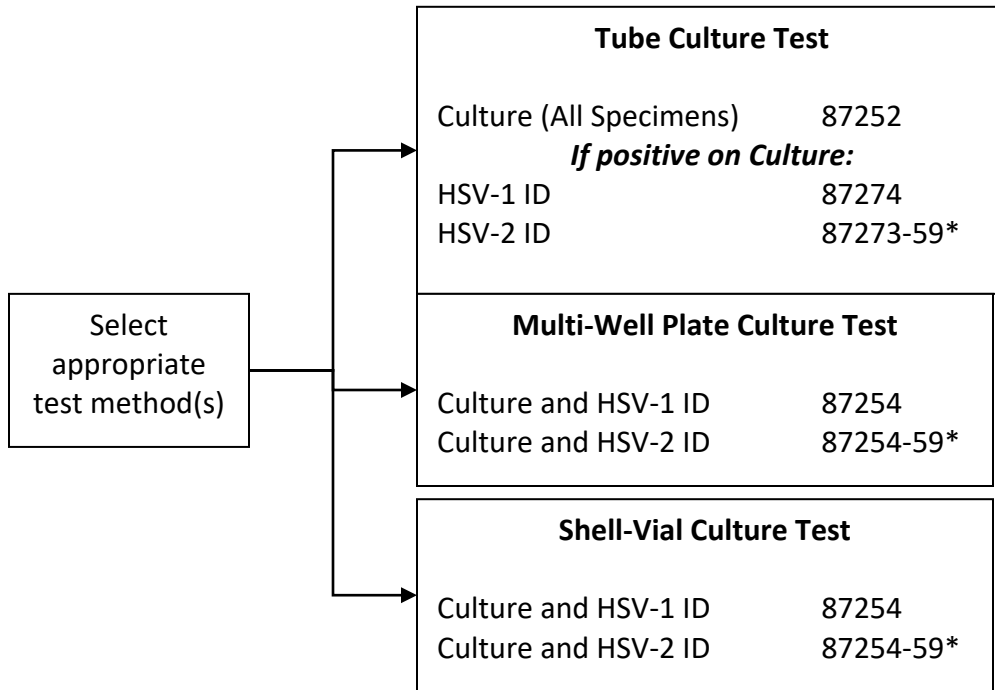
<sup>29</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

## D<sup>3</sup> DFA Herpes Simplex Virus Identification and Typing Kit

### Coding for Herpes Simplex Virus Identification and Typing (D<sup>3</sup>)<sup>30</sup>

Cell Culture Method	Description	CPT
<i>Tube: All Specimens</i> <i>Tube: Positives</i> <i>Tube: Positives</i>	Culture	87252
	HSV-1	87274
	HSV-2	87273-59*
<i>Multi-Well Plate</i>	HSV-1	87254
	HSV-2	87254-59*
<i>Shell-Vial</i>	HSV-1	87254
	HSV-2	87254-59*

### Coding Diagram



\* For laboratory reporting purposes, modifier 59 is used to report procedures that are distinct or independent, such as performing the same procedure (that uses the same procedure code) for testing of a different specimen or different strain. Use modifier 59 when separate results are reported for different species or strains described by the same CPT Code (AMA CPT Assistant, May 2009 Vol 19 Issue 5). Alternatively, it is possible that when reporting multiple results using the same CPT code, some payers may not require use of a modifier and/or may require use of the units of service box on the claim form.

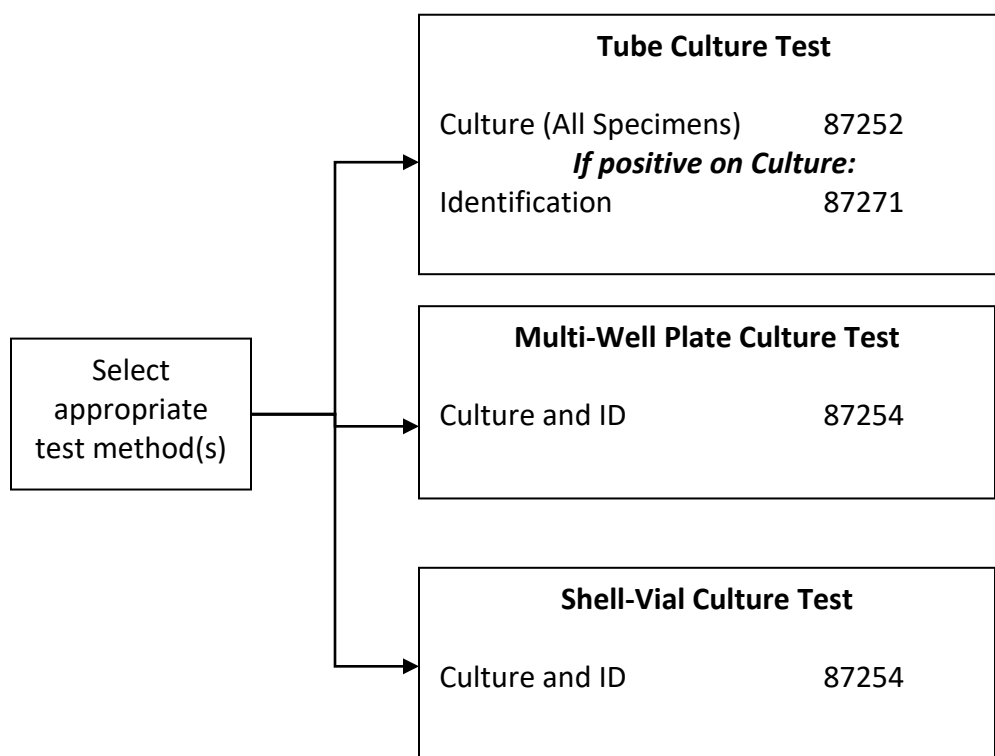
<sup>30</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

## D<sup>3</sup> DFA Cytomegalovirus Immediate Early Antigen Identification Kit

### Coding<sup>31</sup>

Cell Culture Method	CPT
<i>Tube: All Specimens</i>	87252
<i>Tube: Positives</i>	87271
<i>Multi-Well Plate</i>	87254
<i>Shell-Vial</i>	87254

### Coding Diagram



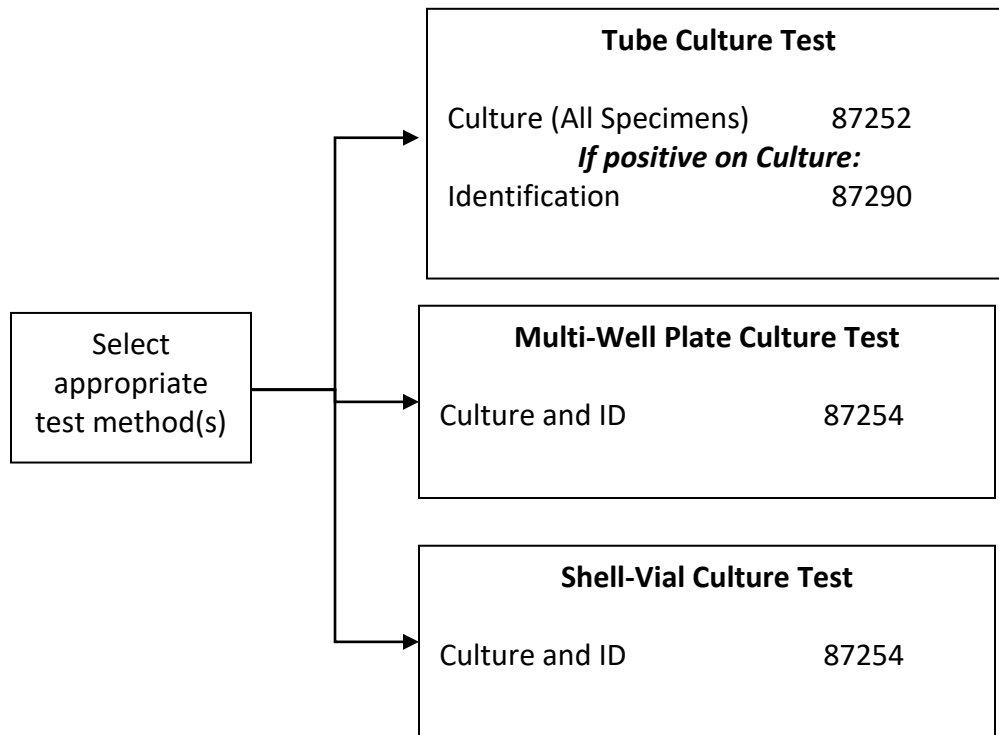
<sup>31</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

## D<sup>3</sup> DFA Varicella-zoster Virus Identification Kit

### Coding<sup>32</sup>

Cell Culture Method	CPT
<i>Tube: All Specimens</i>	87252
<i>Tube: Positives</i>	87290
<i>Multi-Well Plate</i>	87254
<i>Shell-Vial</i>	87254

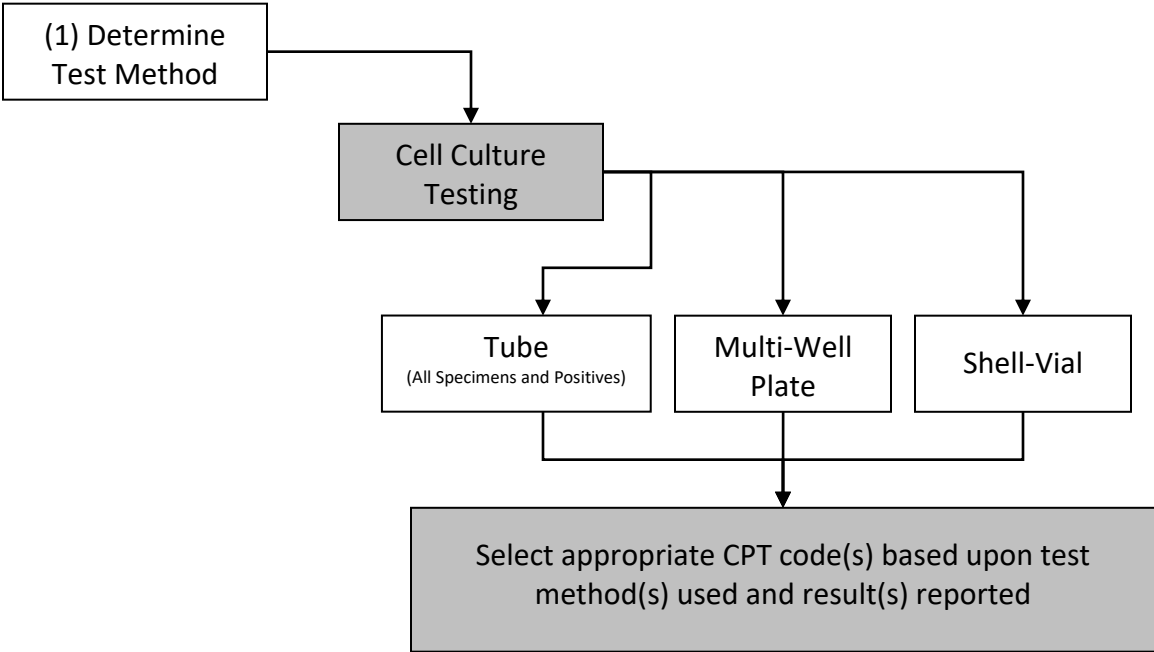
### Coding Diagram



<sup>32</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).

# Enterovirus Testing Solutions

## Enterovirus Testing Coding Roadmap



## Enterovirus Testing CPT Code Descriptors (Reference)

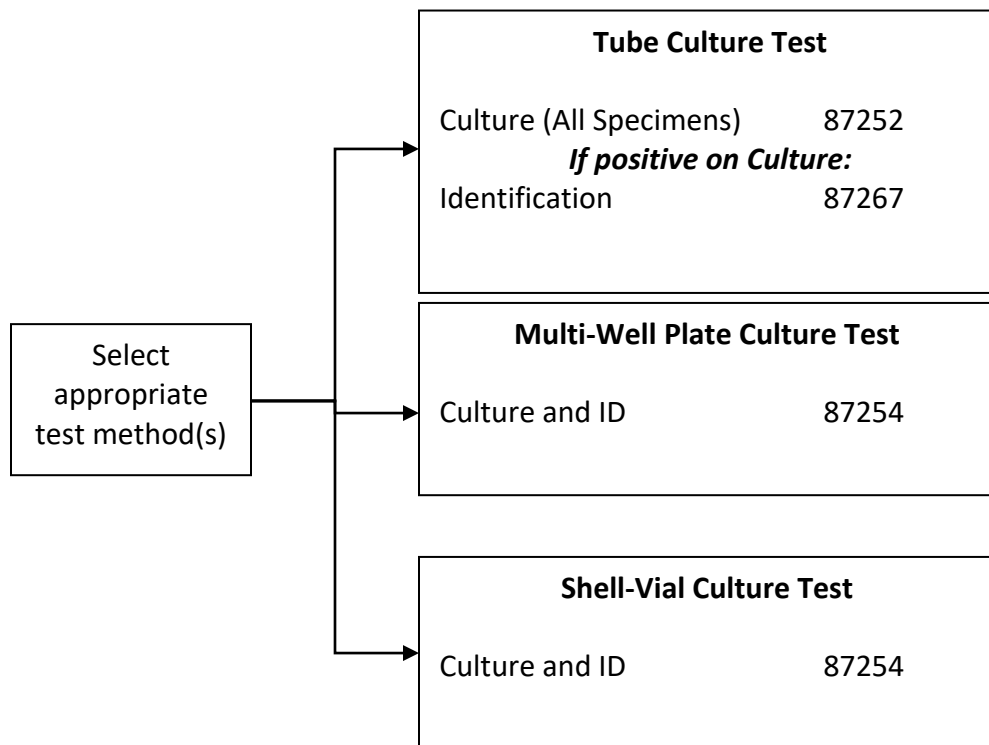
CPT	Description
87140	Culture, typing; immunofluorescent method, each antiserum
87252	Virus isolation; tissue culture inoculation, observation, and presumptive identification by cytopathic effect
87254	Virus isolation; centrifuge enhanced (shell vial) technique, includes identification with immunofluorescence stain, each virus

## D<sup>3</sup> IFA Enterovirus Identification Kit

### Coding<sup>33</sup>

Cell Culture Method	CPT
<i>Tube: All Specimens</i>	87252
<i>Tube: Positives</i>	87267
<i>Multi-Well Plate</i>	87254
<i>Shell-Vial</i>	87254

### Coding Diagram

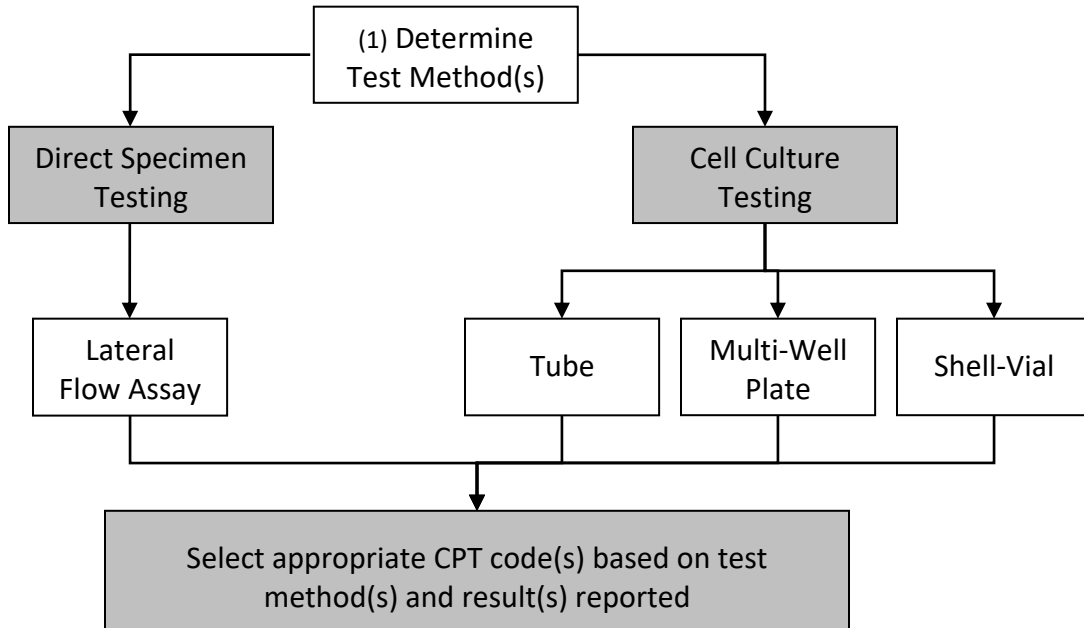


<sup>33</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).



# Chlamydia Testing Solutions

## Chlamydia Testing Coding Roadmap



## Chlamydia Testing CPT Code Descriptors (Reference)

CPT	Description
87110	Culture, chlamydia, any source
87140	Culture, typing; immunofluorescent method, each antiserum
87810	Infectious agent antigen detection by immunoassay with direct optical observation; Chlamydia trachomatis

## D<sup>3</sup> DFA Chlamydiae Culture Confirmation Kit

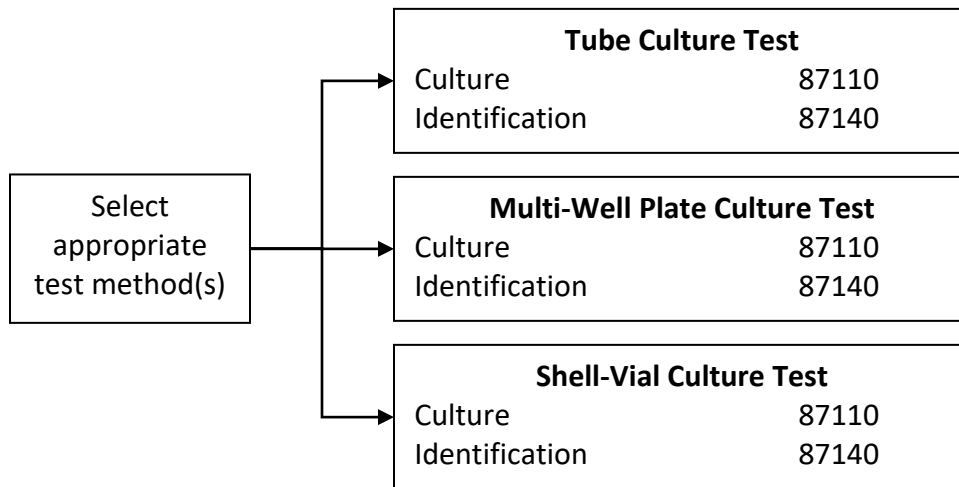
### Coding for Cell Culture Testing<sup>34</sup>

Cell Culture Method	CPT
<i>Tube</i>	87110
<i>Multi-Well Plate</i>	87110
<i>Shell-Vial</i>	87110

### Coding for Cell Culture Identification<sup>34</sup>

Cell Culture Method	CPT
<i>Tube</i>	87140
<i>Multi-Well Plate</i>	87140
<i>Shell-Vial</i>	87140

### Coding Diagram



IN1019000EN00 (09/21)

<sup>34</sup> It is the sole responsibility of the health care provider of service to verify reimbursement policies and select the appropriate CPT and ICD-9-CM codes to accurately reflect patient condition(s) and testing procedure(s).