SUBJECT: Drug Testing
- Qualitative testing
- Quantitative testing

CPT Codes 80375, 80376, 80377 and HCPCS Code 0015U are not eligible for reimbursement.

CPT Code 80374 is considered not medically necessary and not eligible for reimbursement.

Definition: Drug testing is utilized as a key component of the initial assessment, diagnosis, treatment and monitoring of certain medical and psychiatric disorders. This testing involves the collection and analysis of body fluids, especially urine samples, for detection of alcohol, nicotine, other drugs or their metabolites. Drug testing can be useful in identifying the use of specific drugs with the potential for misuse and addiction (addiction medicine).

Basic forms of drug testing include qualitative (utilized to determine presence or absence of drug or drug metabolite) or quantitative testing (utilized to determine specific quantity of drug or drug metabolite present).

Medical Necessity:

I. Qualitative testing: The Company considers qualitative testing (CPT Codes 80305, 80306, 80307, 80320, 80321, 80322, 80323, 80324, 80325, 80326, 80327, 80328, 80332, 80333, 80334, 80335, 80336, 80337, 80338, 80339, 80340, 80341, 80342, 80343, 80344, 80345, 80346, 80347, 80348, 80349, 80350, 80351, 80352, 80353, 80354, 80355, 80356, 80357, 80358, 80359, 80360, 80361, 80362, 80363, 80364, 80365, 80366, 80368, 80369, 80370, 80371, 80372, 80373 and 83992) medically necessary and eligible for reimbursement providing that all of the following medical criteria are met:

- Evaluation is performed by an actively practicing licensed practitioner and testing ordered based upon clinical findings; and
- Testing is performed to evaluate or treat a clinical condition listed below; and
- At least one of the following medical criteria is met:
  1. Individual is undergoing treatment for pain with prescription opioid or other medications with potential for abuse; or
  2. Individual is undergoing treatment or monitoring for opioid addiction relapse or substance abuse; or
  3. Individual is undergoing evaluation of clinical findings that may be due to ingestion of non-prescribed medication(s) with abuse potential (e.g., opiates) or illegal substance use; or
  4. Individual is undergoing evaluation to assess clinical findings of a condition listed below; or
5. Evaluation as part of a pain management program or substance abuse recovery program;

AND

- Testing is performed for at least one of the following:
  1. To verify compliance with prescribed treatment; or
  2. To confirm undisclosed drug use or abuse; or
  3. To evaluate aberrant behavior;

AND

At least one of the following clinical conditions is present:

- Acidosis
- Opioid type dependence, unspecified
- Opioid type dependence continuous use
- Opioid type dependence, in remission
- Combinations of drug dependence excluding opioid type drug, unspecified
- Unspecified drug dependence unspecified use
- Unspecified drug dependence, continuous
- Cannabis abuse, unspecified
- Cannabis dependence, uncomplicated
- Opioid abuse, unspecified
- Opioid abuse, continuous
- Cocaine abuse, unspecified
- Cocaine dependence, uncomplicated
- Other mixed or unspecified drug abuse unspecified use
- Central pain syndrome
- Chronic pain syndrome
- Generalized convulsive epilepsy without intractable epilepsy
- Generalized convulsive epilepsy with intractable epilepsy
- Grand mal status epileptic
- Epilepsy unspecified without intractable epilepsy
- Epilepsy unspecified with intractable epilepsy
- Atrioventricular block unspecified
- First degree atrioventricular block
- Mobitz (type) II atrioventricular block
- Other second degree atrioventricular block
- Long QT syndrome
• Paroxysmal supraventricular tachycardia
• Paroxysmal ventricular tachycardia
• Coma
• Alteration of consciousness other
• Hallucinations
• Other convulsions
• Poisoning by antiallergic and antiemetic drugs
• Poisoning by opium (alkaloids) unspecified
• Poisoning by heroin
• Poisoning by methadone
• Poisoning by other opiates and related narcotics
• Poisoning by salicylates
• Poisoning by aromatic analgesics not elsewhere classified
• Poisoning by pyrazole derivatives
• Poisoning by propionic acid derivatives
• Poisoning by hydantoin derivatives
• Poisoning by barbiturates
• Poisoning by chloral hydrate group
• Poisoning by paraldehyde
• Poisoning by bromine compounds
• Poisoning by methaqualone compounds
• Poisoning by glutethimide group
• Poisoning by mixed sedatives not elsewhere classified
• Poisoning by other sedatives and hypnotics
• Poisoning by unspecified sedative or hypnotic
• Poisoning by antidepressant, unspecified
• Poisoning by monoamine oxidase inhibitors
• Poisoning by selective serotonin and norepinephrine reuptake inhibitors
• Poisoning by selective serotonin reuptake inhibitors
• Poisoning by tetracyclic antidepressants
• Poisoning by tricyclic antidepressants
• Poisoning by other antidepressants
• Poisoning by phenothiazine-based tranquilizers
• Poisoning by butyrophenone-based tranquilizers
• Poisoning by other antipsychotics neuroleptics and major tranquilizers
• Poisoning by benzodiazepine-based tranquilizers
• Poisoning by other tranquilizers
• Poisoning by psychodysleptics (hallucinogens)
• Poisoning by psychostimulant, unspecified
• Poisoning by caffeine
II. **Quantitative testing:** The Company considers quantitative testing (CPT Codes 80323, 80332, 80333, 80334, 80335, 80336, 80337, 80338, 80339, 80340, 80341, 80342, 80343, 80344, 80345, 80348, 80355, 80365, 80366, 80368, 80369, 80370, 80371, HCPCS Codes G0480, G0481, G0482 and G0483) medically necessary and eligible for reimbursement providing that **all** of the following medical criteria are met:

- Evaluation is performed by an actively practicing licensed practitioner and testing ordered based upon clinical findings; and
- Qualitative testing performed meets medical criteria listed above (I); and
- Qualitative test result is negative for prescribed medication(s) or positive for non-prescribed medication(s) with abuse potential (e.g., opiates) or positive for an illegal drug (e.g., methamphetamine or cocaine) or if adulteration of qualitative urine drug testing is suspected (e.g., direct addition of buprenorphine to urine specimen); and
- Testing is performed to evaluate or treat a clinical condition listed below; and
- Testing is supported by documentation demonstrating clinical validity; and
- Clinical documentation demonstrates testing results will directly impact care; and

**AND**

**At least one** of the following clinical conditions is present:

- Acidosis
- Central pain syndrome
- Chronic pain syndrome
- Generalized convulsive epilepsy without intractable epilepsy
- Generalized convulsive epilepsy with intractable epilepsy
- Grand mal status epilepticus
- Epilepsy unspecified without intractable epilepsy
- Epilepsy unspecified with intractable epilepsy
- Atrioventricular block unspecified
- First degree atrioventricular block
- Mobitz (type) II atrioventricular block
- Other second degree atrioventricular block
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- Paroxysmal ventricular tachycardia
- Coma
- Alteration of consciousness other
- Hallucinations
- Other convulsions
- Poisoning by antiallergic and antiemetic drugs
- Poisoning by opium (alkaloids) unspecified
- Poisoning by salicylates
- Poisoning by aromatic analgesics not elsewhere classified
- Poisoning by pyrazole derivatives
- Poisoning by propionic acid derivatives
- Poisoning by hydantoin derivatives
- Poisoning by barbiturates
- Poisoning by chloral hydrate group
- Poisoning by paraldehyde
- Poisoning by bromine compounds
- Poisoning by methaqualone compounds
- Poisoning by glutethimide group
- Poisoning by mixed sedatives not elsewhere classified
- Poisoning by other sedatives and hypnotics
- Poisoning by unspecified sedative or hypnotic
- Poisoning by antidepressant, unspecified
- Poisoning by monoamine oxidase inhibitors
- Poisoning by selective serotonin and norepinephrine reuptake inhibitors
- Poisoning by selective serotonin reuptake inhibitors
- Poisoning by tetracyclic antidepressants
- Poisoning by tricyclic antidepressants
- Poisoning by other antidepressants
- Poisoning by phenothiazine-based tranquilizers
- Poisoning by butyrophenone-based tranquilizers
- Poisoning by other antipsychotics neuroleptics and major tranquilizers
- Poisoning by other tranquilizers
- Poisoning by psychodysleptics (hallucinogens)
- Poisoning by psychostimulant, unspecified
- Poisoning by caffeine
- Poisoning by other specified psychotropic agents
- Poisoning by unspecified psychotropic agent
- Poisoning by other central nervous system stimulants
- Poisoning by cardiotonic glycosides and drugs of similar action
- Poisoning by unspecified drug or medicinal substance
- Long-term (current) use of other medications
- Observation of other suspected mental condition

**Frequency limitations:** The Company limits the frequency of qualitative drug testing (excluding drug screening panel codes listed below) to 20 dates of service within a 365 day time period.

The Company limits the frequency of drug screening panels (CPT Codes 80305, 80306 and 80307) to 12 within a 365 day time period (one unit per date of service regardless of number of drug classes tested).

**NOTE:** CPT Codes 80305, 80306 and 80307 are considered mutually exclusive and are not eligible for reimbursement if submitted on the same date of service.

**NOTE:** The number of tests performed should be judicious and dependent upon the history, physical findings and clinical judgment. Each individual will not necessarily receive the same tests or same number of qualitative or quantitative tests. Drug testing is not recommended to be performed yearly, except in cases where clinically indicated. Providers who perform an unusually high number of tests, either per visit or cumulatively in a given year, will be monitored. Medical record documentation to support clinical validity and utility of additional testing must be made available upon request.

† Aberrant behavior: The Company defines aberrant behavior as including, but not limited to, at least one of the following:

- Repeated requests for early refills; or
- Repeated reports of lost prescriptions; or
- Similar prescriptions from multiple providers; or
- Unauthorized medication dose escalation; or
- Apparent intoxication.

The Company considers quantitative drug testing not medically necessary and not eligible for reimbursement for all other clinical conditions including, but not limited to, the following:

- Routine quantitative drug testing (i.e., testing at each visit); or
- Quantitative testing when qualitative testing is clinically appropriate and meets clinical needs; or
- Routine confirmatory testing in the absence of an unexpected positive finding or an unexpected negative finding; or
- Testing ordered by or for third parties for the sole purpose of meeting the requirements of a third party.
The Company considers qualitative and quantitative drug testing for all other clinical conditions not medically necessary and not eligible for reimbursement.

NOTE: This Corporate Medical Policy does not address the use of qualitative and quantitative drug testing for the following:

- Emergency department testing; or
- Screening or testing for commercial drivers licensing; or
- Screening or testing for any other employment-related reason; or
- State or legally mandated drug testing.

Documentation Requirements:

The Company reserves the right to request additional documentation as part of its coverage determination process. The Company may deny reimbursement when it has determined that the services performed were not medically necessary, investigational or experimental, not within the scope of benefits afforded to the member and/or a pattern of billing or other practice has been found to be either inappropriate or excessive. Additional documentation supporting medical necessity for the services provided must be made available upon request to the Company. Documentation requested may include patient records, test results and/or credentials of the provider ordering or performing a service. The Company also reserves the right to modify, revise, change, apply and interpret this policy at its sole discretion, and the exercise of this discretion shall be final and binding.
Sources of Information:


Applicable Code(s):

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<th>CPT:</th>
<th>80305, 80306, 80307, 80320, 80321, 80322, 80323, 80324, 80325, 80326, 80327, 80328, 80332, 80333, 80334, 80335, 80336, 80337, 80338, 80339, 80340, 80341, 80342, 80343, 80344, 80345, 80346, 80347, 80348, 80349, 80350, 80351, 80352, 80353, 80354, 80355, 80356, 80357, 80358, 80359, 80360, 80361, 80362, 80363, 80364, 80365, 80366, 80368, 80369, 80370, 80371, 80372, 80373, 80374, 80375, 80376, 80377 and 83992</th>
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