

# MHIL Provider Memo

Molina Healthcare of Illinois, Inc. | July 31, 2024

## In-Office Laboratory Tests & Preferred Labs Update

Molina Healthcare of Illinois (Molina) reminds providers that our policies allow only certain lab tests to be performed in a provider's office. This applies to Medicaid, MMP/Duals, Marketplace, and Medicare. Refer to the Provider Responsibilities chapter in the 2024 Provider Manuals under the subheading In-Office Laboratory Tests. The revised list of approved in-office lab tests will take effect on **October 1, 2024**.

All other lab testing **must** be referred to an in-network, certified, full-service laboratory provider offering a comprehensive test menu that includes routine, complex, drug, genetic testing, and pathology.

### Lab tests allowed in office

Specimen collection is allowed in a provider's office and shall be compensated in accordance with your agreement with Molina, as well as applicable state and federal billing and payment rules and regulations. Providers are encouraged to continue collecting the laboratory test specimen in the office and sending the sample/specimen to an in-network lab.

Claims for tests performed in the provider's office but **not** on Molina's list of allowed in-office laboratory tests will be denied.

### Approved List of Lab Tests That Can Be Performed in a POS 11 (Provider's Office)

CPT Code	Description
80047	BASIC METABOLIC PANEL CALCIUM IONIZED
80048	BASIC METABOLIC PANEL CALCIUM TOTAL
80053	COMPREHENSIVE METABOLIC PANEL
80061	LIPID PANEL
80178	DRUG SCREEN QUANTITATIVE LITHIUM
80305	DRUG TEST PRSMV READ DIRECT OPTICAL OBS PR DATE
80306	DRUG TST PRSMV READ INSTRMNT ASSTD DIR OPT OBS
80307	DRUG TST PRSMV INSTRMNT CHEM ANALYZERS PR DATE
81000	URINLS DIP STICK TABLET REAGNT NON-AUTO MICRSCP
81001	URNLS DIP STICK TABLET REAGENT AUTO MICROSCOPY
81002	URNLS DIP STICK TABLET RGNT NON-AUTO W O MICRSCP
81003	URNLS DIP STICK TABLET RGNT AUTO W O MICROSCOPY
81004	URINALYSIS
81005	URINALYSIS QUAL SEMIQUANT EXCEPT IMMUNOASSAYS
81025	URINE PREGNANCY TEST VISUAL COLOR CMPRSN METHS
82043	URINE ALBUMIN QUANTITATIVE
82075	ASSAY OF ALCOHOL BREATH
82120	AMINES VAGINAL FLUID QUALITATIVE
82247	BILIRUBIN TOTAL
82248	BILIRUBIN DIRECT

## Approved List of Lab Tests That Can Be Performed in a POS 11 (Provider's Office)

CPT Code	Description
82270	BLOOD OCCULT PEROXIDASE ACTV QUAL FECES 1 DETER
82271	BLOOD OCCULT PEROXIDASE ACTV QUAL OTHER SOURCES
82272	BLOOD OCCULT PEROXIDASE ACTV QUAL FECES 1-3 SPEC
82274	BLOOD OCCULT FECAL HGB DETER IA QUAL FECES 1-3
82465	CHOLESTEROL SERUM WHOLE BLOOD TOTAL
82565	CREATININE BLOOD
82568	CREATININE
82570	CREATININE OTHER SOURCE
82575	CREATININE CLEARANCE
82947	GLUCOSE QUANTITATIVE BLOOD XCPT REAGENT STRIP
83036	HEMOGLOBIN GLYCOSYLATED A1C
83051	ASSAY OF HEMOGLOBIN PLASMA
83655	ASSAY OF LEAD
83721	LIPOPROTEIN DIRECT MEASUREMENT LDL CHOLESTEROL
83735	ASSAY OF MAGNESIUM
84436	ASSAY OF THYROXINE TOTAL
84437	ASSAY OF THYROXINE REQUIRING ELUTION
84439	ASSAY OF FREE THYROXINE
84443	ASSAY OF THYROID STIMULATING HORMONE TSH
85007	BLOOD COUNT SMEAR MCRSCP W MNL DIFRNTL WBC COUNT
85008	BLD COUNT SMEAR MCRSCP W O MNL DIFRNTL WBC COUNT
85014	BLOOD COUNT HEMATOCRIT
85018	BLOOD COUNT HEMOGLOBIN
85025	BLOOD COUNT COMPLETE AUTO AND AUTO DIFRNTL WBC
85026	BLOOD COUNT COMPLETE
85027	BLOOD COUNT COMPLETE AUTOMATED
85032	BLOOD COUNT MANUAL CELL COUNT EACH
85049	BLOOD COUNT PLATELET AUTOMATED
85060	BLOOD SMEAR PERIPHERAL INTERP PHYS W WRIT REPORT
85095	BONE MARROW ASP ONLY
85102	BONE MARROW BIOPSY CORE
85535	IRON STAIN
85576	PLATELET AGGREGATION IN VITRO EACH AGENT
85610	PROTHROMBIN TIME
86308	HETEROPHILE ANTIBODIES SCREEN
86580	SKIN TEST TUBERCULOSIS INTRADERMAL
87400	IAAD IA INFLUENZA A B EACH
87804	IAADIADOO INFLUENZA
87807	IAADIADOO RESPIRATORY SYNCTIAL VIRUS
87880	IAADIADOO STREPTOCOCCUS GROUP A
88150	CYTP SLIDES C V MNL SCR UNDER PHYS

## Approved List of Lab Tests That Can Be Performed in a POS 11 (Provider's Office)

CPT Code	Description
88152	CYTP SLIDES C V MNL SCR AND CPTR RESCR PHYS
88153	CYTP SLIDES C V MNL SCR AND RESCR PHYS
88154	CYTP SLIDES C V MNL SCR AND CPTR-RESCR CELL S AND I
88155	CYTP SLIDES C V DEFINITIVE HORMONAL EVAL
88164	CYTP SLIDES CERV VAG MNL SCR N PHYSICIAN SUPV
88165	CYTP SLIDES C V MNL SCR AND RESCR PHYS SUPV
88166	CYTP SLIDES C V MNL SCR AND CPTR RESCR PHYS SUPV
88167	CYTP SLIDES C V MNL SCR AND CPTR RESCR CELL S AND I
88174	CYTP C V AUTO THIN LYR PREPJ SCR SYS PHYS
88175	CYTP C V AUTO THIN LYR PREPJ SCR MNL RESCR PHYS
88305	LEVEL IV SURG PATHOLOGY GROSS AND MICROSCOPIC EXAM
88312	SPECIAL STAIN GROUP 1 MICROORGANISMS I AND R
88313	SPCL STN 2 I AND R EXCPT MICROORG ENZYME IMCYT
88331	PATH CONSLTJ SURG 1ST BLK FROZEN SCTJ 1 SPEC
88332	PATH CONSLTJ SURG EA ADDL BLK FROZEN SECTION
88342	IMHISTOCHEM CYTCHM 1ST ANTIBODY STAIN PROCEDURE
88720	BILIRUBIN TOTAL TRANSCUTANEOUS
G0328	COLOREC CA SCR; FOB TST IMMUNO 1-3 SIMULTANEOUS
<b>COVID-Related Short-Term</b>	
0202U	NFCT DS BCT/VIR RESPIR DNA/RNA 22 TRGT SARSCOV2
0223U	NFCT DS BCT/VIR RESPIR DNA/RNA 22 TRGT SARSCOV2
0225U	NFCT DS DNA AND RNA 21 TARGETS SARS-COV-2 AMP PROBE
0240U	NFCT DS RNA 3 TARGETS UPPER RESPIRATORY SPECIMEN
0241U	NFCT DS RNA 4 TARGETS UPPER RESPIRATORY SPECIMEN
87426	IAAD IA SEVERE AQT RESPIR SYND CORONAVIRUS
87635	IADNA SARS-COV-2 COVID-19 AMPLIFIED PROBE TQ
87636	IADNA SARSCOV2 AND INF A AND B MULT AMPLIFIED PROBE TQ
87637	IADNA SARSCOV2 AND INF A AND B AND RSV MULT AMP PROBE
87811	IAADIADOO SEVERE AQT RESPIR SYND CORONAVIRUS
87275	IAADI INFLUENZA B VIRUS
87276	IAADI INFFLUENZA A VIRUS
87280	IAADI RESPIRATORY SYNCTIAL VIRUS
87420	IAAD IA RESPIRATORY SYNCTIAL VIRUS
87428	IAAD IA SARSCOV AND INFLUENZA VIRUS TYPES A AND B
<b>Allow for OB/GYN</b>	
83986	PH BODY FLUID
87210	KOH WET MOUNT/INDIA INK

### In-network independent labs

Additional information regarding in-network laboratory providers and patient service centers can be found on the laboratory providers' respective websites, [QuestDiagnostics.com](https://www.questdiagnostics.com) and [LabCorp.com](https://www.labcorp.com).

## Questions?

We're here to help! Contact your dedicated provider relations manager or email the Provider Network Management team at [MHILProviderNetworkManagement@MolinaHealthcare.com](mailto:MHILProviderNetworkManagement@MolinaHealthcare.com). To help identify your dedicated provider relations manager, visit our [Service Area page](#) at [MolinaHealthcare.com](http://MolinaHealthcare.com).

## Provider portal alert

Providers no longer have direct access to the Molina Legacy Provider Portal. Ensure that you and your staff have access to streamlined claims management, authorizations, eligibility/benefit verification, and more. Get started with the [Avality Essentials Portal](#) today!

## Get critical updates

Receive news and updates about Molina services and plan requirements delivered straight to your inbox! [Click here](#) to receive updates curated for Molina's Illinois providers.

**Note:** Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.