Kansas City | BLUE MEDICARE ADVANTAGE

Blue Cross & Blue Shield of Kansas City January 2022 Outpatient Lab Exclusion List for Blue Medicare Advantage HMO/PPO This chart lists outpatient lab tests that can be performed in a PCP, specialist or urgent care office without sending to Quest or Labcorp. These tests may NOT be performed in a lab at a facility for outpatients.			
Procedure Code	**Exception Effective as of DOS**	**Description**	**Provider Specialty Exception Applies**
36400	7/1/2000	Venipuncture, < Age 3; Femoral, Jugular	All Specialties
36405	7/1/2000	Venipuncture, < Age 3; Scalp Vein	All Specialties
36406	7/1/2000	Venipuncture, < Age 3; Other Vein	All Specialties
36410	7/1/2000	Venipuncture, Child > Age 3/Adult, Requiring Physician Skill (Sep Proc)	All Specialties
36415	7/1/2000	Collection, Venous Blood, Venipuncture	All Specialties
36416	1/1/2003	Collection, Capillary Blood Specimen	All Specialties
80048	1/1/2016	Basic Metabolic Panel	All Specialties
80051	1/1/2016	Electrolyte Panel	All Specialties
80053	1/1/2016	Comprehensive Metabolic Panel	All Specialties
81000	1/1/2016	Urinalysis, Dip Stick/Tablet Reagent; Non-Automated W/Microscopy	All Specialties
81001	1/1/2016	Urinalysis, Dip Stick/Tablet Reagent; Automated W/ Microscopy	All Specialties
81002	7/1/2000	Urinalysis, Dip Stick/Tablet Reagent; Non-Automated, W/O Microscopy	All Specialties
81003	1/1/2016	Urinalysis, Dip Stick/Tablet Reagent; Automated, W/O Microscopy	All Specialties
81025	7/1/2000	Urine Pregnancy Test, Visual Color Comparison Methods	All Specialties
82106	7/1/2000	Alpha-Fetoprotein; Amniotic Fluid	All Specialties
82150	7/1/2002	Amylase	All Specialties
82247	1/1/2015	Bilirubin; Total	All Specialties
82248	1/1/2015	Bilirubin; Direct	All Specialties
82375	4/1/2006	Carbon Monoxide (Carboxyhemoglobin); Quantitative	All Specialties
82465	1/1/2015	Cholesterol, Serum/Whole Blood, Total	All Specialties
82550	7/1/2002	Creatine Kinase (Ck), (Cpk); Total	All Specialties
82800	1/1/2001	Gases, Blood, Ph Only	All Specialties
82803	1/1/2001	Gases, Blood, Ph, Pco2, Po2, Co2, Hco3, (W/Calculated O2 Sat)	All Specialties
82805	1/1/2001	Gases, Blood, Ph, Pco2, Po2, Co2, Hco3; W/O2 Sat, Direct Measure, W/O Pulse Oximetry	All Specialties
82810	1/1/2001	Gases, Blood, O2 Sat Only, Direct Measure, Not Pulse Oximetry	All Specialties
82820	1/1/2001	Hemoglobin-Oxygen Affinity (Po2, 50 Pct Hemoglobin Saturation W/Oxygen)	All Specialties
82947	7/1/2000	Glucose; Quantitative, Blood (Except Reagent Strip)	All Specialties
82950	7/1/2000	Glucose; Post Glucose Dose (Includes Glucose)	All Specialties
82951	7/1/2000	Glucose; Tolerance Test (Gtt), 3 Specimens (Includes Glucose)	All Specialties
82962	7/1/2000	Glucose, Blood, Glucose Monitoring Device(S) Cleared By Fda Specifically For Home Use	All Specialties
83036	1/1/2015	Hemoglobin; Glycated	All Specialties
83050	4/1/2006	Hemoglobin; Methemoglobin; Quantitative	All Specialties
83051	4/1/2006	Hemoglobin; Plasma	All Specialties
83655	1/1/2016	Lead	All Specialties
83690	7/1/2002	Lipase	All Specialties
83718	1/1/2015	Lipoprotein, Direct Measurement; High Density Cholesterol (Hdl Cholesterol)	All Specialties

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83861	3/1/2013	Microfluidic Analysis Utilizing An Integrated Collection And Analysis	All Specialties
84238	1/1/2015	Receptor Assay; Non-Endocrine	All Specialties
84520	7/1/2002	Urea Nitrogen; Quantitative	All Specialties
84703	4/1/2006	Gonadotropin, Chorionic (Hcg); Qualitative	All Specialties
85004	4/1/2006	Blood Count; Automated Differential Wbc Count	All Specialties
85007	1/1/2016	Blood Count; Blood Smear, Microscop Exam W/Manual Differential Wbc Count	All Specialties
85009	4/1/2006	Blood Count; Manual Differential Wbc Count, Buffy Coat	All Specialties
85014	4/1/2006	Blood Count; Hematocrit	All Specialties
85018	1/1/2016	Blood Count; Hemoglobin	All Specialties
85025	1/1/2016	Blood Count; Complete Cbc, Automated (Hgb, Hct, Rbc, Wbc, & Platelet) & Automated Differential Wbc	All Specialties
85027	1/1/2016	Blood Count; Complete Cbc, Automated (Hgb, Hct, Rbc, Wbc, & Platelet)	All Specialties
85610	1/1/2016	Prothrombin time	All Specialties
86003	1/1/2015	Allergen Specific Ige; Quantitative/Semiquantitative, Each Allergen	All Specialties
86308	4/1/2006	Heterophile Antibodies; Screening	All Specialties
86359	1/1/2015	T Cells; Total Count	All Specialties
86360	1/1/2015	T Cells; Absolute Cd4 & Cd8 Count, W/Ratio	All Specialties
86361	1/1/2015	T Cells; Absolute Cd4 Count	All Specialties
86403	7/1/2000	Particle Agglutination; Screen, Each Antibody	All Specialties
86485	7/1/2000	Skin Test; Candida	All Specialties
86490	7/1/2000	Skin Test; Coccidioidomycosis	All Specialties
86510	7/1/2000	Skin Test; Histoplasmosis	All Specialties
86580	7/1/2000	Skin Test; Tuberculosis, Intradermal	All Specialties
86586	7/1/2000	Skin Test; Unlisted Antigen, Each	All Specialties
86677	1/1/2015	Antibody; Helicobacter Pylori	All Specialties
86812	1/1/2015	Hla Typing; A, B, Or C, Single Antigen	All Specialties
87070	1/1/2015	Culture, Bacterial; Any Other Source Except Urine/Blood/Stool W/Isolatn & Presumptive Id	All Specialties
87205	1/1/2016	Smear, Primary Source W/Interpretation; Gram Or Giemsa Stain, Bacteria/Fungi/Cell Types	All Specialties
87210	7/1/2000	Smear, Primary Source W/Interpretation; Wet Mount, For Infectious Agents	All Specialties
87220	7/1/2000	Tissue Exam By Koh Slide Of Samples From Skin/Hair/Nails, Fungi/Ectoparasite Ova/Mites	All Specialties
87430	1/1/2001	Enzyme Immunoassay (Eia) Qualitative/Semiquantitative, Multiple Step; Streptococcus, Group A	All Specialties
87480	1/1/2001	Infectious Agent, Nucleic Acid (Dna/Rna); Candida, Direct Probe	All Specialties

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87502	11/1/2018	Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, for multiple types or sub-types, includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, first 2 types or sub-types	All Specialties
87510	1/1/2001	Infectious Agent, Nucleic Acid (Dna/Rna); Gardnerella Vaginalis, Direct Probe	All Specialties
87650	4/1/2006	Infectious Agent, Nucleic Acid (Dna/Rna); Streptococcus Group A, Direct Probe	All Specialties
87651	11/1/2018	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, amplified probe technique	All Specialties
87660	4/1/2005	Infectious Agent Detection By Nucleic Acid (DNA or RNA); Trichomonas Vaginalis, Direct Probe Technique	All Specialties
87797	7/1/2002	Infectious Agent, Nucleic Acid (Dna/Rna), Nos; Direct Probe Technique, Ea Organism	All Specialties
87804	10/1/2007	Infectious Agent, Immunoassay, Direct Observation; Influenza	All Specialties
87807	4/1/2013	Infectious Agent, Antigen Detection by Immunoassay, Direct Observation	All Specialties
87808	3/1/2013	Infectious Agent, Antigen Detection by Immunoassay, Direct Observation	All Specialties
87809	5/1/2014	Infectious Agent, Antigen Detection by Immunoassay with Direct Optical	All Specialties
87880	7/1/2003	Infectious Agent, Immunoassay, Direct Observation; Strepococcus Group A	All Specialties
88173	1/1/2015	Cytopathology, Eval Fine Needle Aspirate; Interpretation & Report	All Specialties
88235	7/1/2000	Tissue Culture, Non-Neoplastic Disorders; Amniotic Fluid/Chorionic Villus Cells	All Specialties
88267	7/1/2000	Chromosome Analysis Amniotic Fluid/Chorionic Villus, 15 Cells, 1 Karyotype W/Banding	All Specialties
89300	7/1/2000	Semen Analysis; Presence &/Or Motility, Sperm W/Huhner Test (Post Coital)	All Specialties
89321	7/1/2000	Semen Analysis, Presence &/Or Motility Of Sperm	All Specialties
G0434	4/1/2013	Narcotic misuse/abuse	All Specialties

Version #	Date	Purpose/Summary of Major Changes
01	10/09/2015	Original version.
02	10/11/2019	Added CPT Codes: 87502 & 87651 eff: 11/02/2018
03	10/29/2020	No Changes.
04	11/30/2021	No Changes.