

Article ID Number: A56643 **Status:** A-Approved

Article Title: Billing and Coding: C-Reactive Protein High Sensitivity Testing (hsCRP)

Original Article Effective Date: 06/27/2019

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Article Text:

Refer to the Novitas Local Coverage Determination (LCD) L34856, C-Reactive Protein High Sensitivity Testing (hsCRP), for reasonable and necessary requirements and frequency limitations.

The Current Procedural Terminology (CPT)/Healthcare Common Procedure Coding System (HCPCS) code(s) may be subject to National Correct Coding Initiative (NCCI) edits. This information does not take precedence over NCCI edits. Please refer to NCCI for correct coding guidelines and specific applicable code combinations prior to billing Medicare.

Coding Guidance

CPT code 86140 is not to be used in place of CPT code 86141, which represents high sensitivity C-reactive protein (hsCRP) testing.

Frequency Limitations

Consistent with the related LCD, no more than 3 services of CPT code 86141 may be reported per patients lifetime.

Coding Information

Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

12	Hospital Inpatient (Medicare Part B only)
13	Hospital Outpatient
14	Hospital - Laboratory Services Provided to Non-patients
22	Skilled Nursing - Inpatient (Medicare Part B only)
23	Skilled Nursing - Outpatient
72	Clinic - Hospital Based or Independent Renal Dialysis Center
83	Ambulatory Surgery Center
85	Critical Access Hospital

Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory; unless specified in the policy services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes

indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

0300	Laboratory - General Classification
0301	Laboratory - Chemistry
0302	Laboratory - Immunology
0303	Laboratory - Renal Patient (Home)
0304	Laboratory - Non-Routine Dialysis
0305	Laboratory - Hematology
0306	Laboratory - Bacteriology & Microbiology
0307	Laboratory - Urology
0309	Laboratory - Other Laboratory

CPT/HCPCS Codes:

Group 1 Paragraph:

Note: Providers are reminded to refer to the long descriptors of the CPT codes in their CPT book.

Group 1 CPT Codes:

[86141](#)

C-REACTIVE PROTEIN; HIGH SENSITIVITY (HSCRIP)

ICD-10 Codes That Are Covered

It is the provider’s responsibility to select codes carried out to the highest level of specificity and selected from the ICD-10-CM code book appropriate to the year in which the service is rendered for the claim(s) submitted.

Medicare is establishing the following limited coverage for CPT/HCPCS codes: **86141**.

Note: Use ICD-10-CM code Z74.09 and Z78.9 for patients at intermediate risk for CAD who do not have elevated lipids (i.e., do not meet criteria to use ICD-10-CM codes E78.00-E78.3 or E78.49).

E78.00	Pure hypercholesterolemia, unspecified
E78.01	Familial hypercholesterolemia
E78.1	Pure hyperglyceridemia
E78.2	Mixed hyperlipidemia
E78.3	Hyperchylomicronemia
E78.49	Other hyperlipidemia
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
Z74.09	Other reduced mobility
Z78.9	Other specified health status