

Vitamin D Testing Policy, Professional for Louisiana

IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

You are responsible for submission of accurate claims. This reimbursement policy is intended to ensure that you are reimbursed based on the code or codes that correctly describe the health care services provided. UnitedHealthcare Community Plan reimbursement policies uses Current Procedural Terminology (CPT®), Centers for Medicare and Medicaid Services (CMS) or other coding guidelines. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement.

This reimbursement policy applies to all health care services billed on CMS 1500 forms and, when specified, to those billed on UB04 forms. Coding methodology, industry-standard reimbursement logic, regulatory requirements, benefits design and other factors are considered in developing reimbursement policy.

This information is intended to serve only as a general reference resource regarding UnitedHealthcare Community Plan's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Community Plan may use reasonable discretion in interpreting and applying this policy to health care services provided in a particular case. Further, the policy does not address all issues related to reimbursement for health care services provided to UnitedHealthcare Community Plan enrollees.

Other factors affecting reimbursement supplement, modify or, in some cases, supersede this policy. These factors include, but are not limited to: federal &/or state regulatory requirements, the physician or other provider contracts, the enrollee's benefit coverage documents, and/or other reimbursement, medical or drug policies.

Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by UnitedHealthcare Community Plan due to programming or other constraints; however, UnitedHealthcare Community Plan strives to minimize these variations.

UnitedHealthcare Community Plan may modify this reimbursement policy at any time by publishing a new version of the policy on this Website. However, the information presented in this policy is accurate and current as of the date of publication.

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Application

This reimbursement policy applies to UnitedHealthcare Community Plan Louisiana Medicaid products.

This reimbursement policy applies to services reported using the 1500 Health Insurance Claim Form (a/k/a CMS-1500) or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network physicians and other qualified health care professionals, including, but not limited to, non-network authorized and percent of charge contract physicians and other qualified health care professionals.

Policy

Overview

This policy describes reimbursement for Vitamin D testing. Claims will be considered for reimbursement if they include one of the codes on CMS ICD-10 diagnosis codes list that supports Vitamin D testing.

Reimbursement Guidelines

Per the American Association of Clinical Endocrinologists and The American College of Endocrinology, "Reasonable approaches to vitamin D assessment and treatment include an initial measurement of 25(OH)D in patients at risk of deficiency, or alternatively, vitamin D supplementation and subsequent 25(OH)D measurement 3-4 months later to assess dose adequacy."¹

Laboratory testing is appropriate in higher risk patients when results will be used to institute more aggressive therapy.

UnitedHealthcare Community Plan Louisiana Medicaid will consider one Vitamin D screening per member, per year. For members with Vitamin D deficiency UHC Louisiana Medicaid will consider up to four Vitamin D tests per year when, submitted with an appropriate ICD-10 diagnosis code in any position. Vitamin D tests (CPT code 82306 or 82652) that do not include a diagnosis code from the Vitamin D Testing diagnosis list will be denied.

CPT Code Section	
82306	82652

Attachments: Please right-click on the icon to open the file.	
 UnitedHealthcare Community Plan LA Medicaid ICD-10 Vitamin D Testing 82306 List	CMS LCD sourced list of ICD-10-CM diagnosis codes that support Vitamin D testing for CPT code 82306
 UnitedHealthcare Community Plan LA Medicaid ICD-10 Vitamin D Testing 82652 List	CMS LCD sourced list of ICD-10-CM diagnosis codes that support Vitamin D Testing for CPT code 82652

Resources
Louisiana State Medicaid regulations, manuals & fee schedules American Association of Clinical Endocrinologists and The American College of Endocrinology Centers for Medicare & Medicaid Services ¹ http://journals.aace.com/doi/pdf/10.4158/PS-2018-0050

History	
12/01/2020	Policy implemented by UnitedHealthcare Louisiana Medicaid
10/1/2018	Policy implemented by UnitedHealthcare Community & State; Louisiana excluded