

## IN-OFFICE LABORATORY PROCEDURES

McLaren Health Plan (MHP) contracts with Joint Venture Hospital Laboratories (JVHL) to provide all outpatient laboratory services. In order to better serve our members, MHP allows physicians to perform and submit claims for specific laboratory services performed in their offices.

The **in-office** laboratory procedures listed below are billable by Primary Care Physicians and Specialists.

MHP In-Office Laboratory Billable Procedures		
CPT-4 Code		Procedure Description
80048		BASIC METABOLIC PANEL
80051		ELECTROLYTE PANEL
80305**		DRUG TEST CAPABLE OF BEING READ BY DIRECT OPTICAL OBSERVATION
81000		URINALYSIS; NON-AUTOMATED, WITH MICROSCOPY
81001		URINALYSIS; AUTOMATED, WITH MICROSCOPY
81002		URINALYSIS; NON-AUTOMATED, WITHOUT MICROSCOPY
81003		URINALYSIS; AUTOMATED, WITHOUT MICROSCOPY
81007QW		URINALYSIS SCREEN FOR BACTERIA, EXCEPT BY CULTURE OR DIPSTICK
81015		URINANLYSIS; MICROSCOPIC ONLY
81025		URINE PREGNANCY TEST, BY VISUAL COLOR COMPARISON METHODS
82044		URINARY MICROALBUMIN
82270		BLOOD, OCCULT; FECES SCREENING BY PEROXIDASE ACTIVITY, 1-3 SIMULTANEOUS DETERMINATIONS
82272		BLOOD, OCCULT; FECES SCREENING BY PEROXIDASE ACTIVITY, SINGLE SPECIMEN (E.G., FROM DIGITAL RECTAL EXAM)
82274QW		BLOOD, OCCULT; FECAL HEMOGLOBIN SCREENING BY IMMUNOASSAY, 1-3 SIMULTANEOUS DETERMINATIONS
82310		CALCIUM; TOTAL
82374		CARBON DIOXIDE (BICARBONATE)
82435		CHLORIDE; BLOOD
82565		CREATININE; BLOOD
82670	*	ESTRADIOL
82947QW		GLUCOSE; QUANTITATIVE
82948		GLUCOSE; BLOOD, REAGENT STRIP
83001QW	*	GONADOTROPIN; FOLLICLE STIMULATING HORMONE (FSH)
83002	*	GONADOTROPIN; LUTEINIZING HORMONE (LH)
83036		HEMOGLOBIN, GLYCATED
83037		GLYCOSYLATED HEMOGLOBIN TEST
83655		LEAD
84144	*	PROGESTERONE
84146	*	PROLACTIN
84295		SODIUM; SERUM, PLASMA OR WHOLE BLOOD

### MHP In-Office Laboratory Billable Procedures

CPT-4 Code		Procedure Description
84520		UREA NITROGEN; QUANTITATIVE
84703QW		GONADOTROPIN, CHORIONIC (HCG); QUALITATIVE
85007		BLOOD SMEAR, MICROSCOPIC EXAMINATION WITH MANUAL DIFFERENTIAL WBC COUNT
85013		BLOOD COUNT; SPUN MICROHEMATOCRIT
85014QW		BLOOD SMEAR; HEMATOCRIT (HCT)
85018QW		BLOOD SMEAR; HEMOGLOBIN (HGB)
85025		COMPLETE BLOOD CT (CBC-HGB, HCT, RBC, WBC, AND PLT) AND DIFF, AUTOMATED
85027		BLOOD COUNT; COMPLETE (CBC) AUTOMATED (HGB, HCT, RBC, WBC, PLAT)
85048		BLOOD COUNT; LEUKOCYTE (WBC), AUTOMATED
85097	*	BONE MARROW; SMEAR INTERPRETATION ONLY, W/OR W/O DIFF.CELL CNT
85610		PROTHROMBIN TIME
85651		SEDIMENTATION RATE, ERYTHROCYTE; NON-AUTOMATED
86308QW		HETEROPHILE ANTIBODIES; SCREENING
86403		PARTICLE AGGLUTINATION (SCREENING EACH ANTIBODY) RAPID STREP TEST
86580		SKIN TEST; TUBERCULOSIS, INTRADERMAL
87081		CULTURE, BACTERIAL, SCREENING ONLY; FOR SINGLE ORGANISMS
87210		SMEAR, PRIMARY SOURCE, W/INTERP; WET MOUNT SIMPLE STAIN
87220	*	TISSUE EXAMINATION BY KOH SLIDE FOR FUNGI
87650		STREPTOCOCCUS, GROUP A, DIRECT PROBE TECHNIQUE
87880QW		INFECTIOUS AGENT DETECTION IMMUNOASSAY OBS, STREPT GROUP A
89050		CELL COUNT, MISCELLANEOUS BODY FLUIDS, EXCEPT BLOOD
89190		NASAL SMEAR FOR EOSINOPHILS
89300/G0027	*	SEMEN ANALYSIS; PRESENCE AND/OR MOTILITY OF SPERM
89310	*	SEMEN ANALYSIS; MOTILITY AND COUNT (NOT INC. HUHNER TEST)
89320	*	SEMEN ANALYSIS; COMPLETE (VOLUME, COUNT, MOTILITY, DIFFERENTIAL)

\*Only specialists may perform these services

\*\*Requires pre-authorization