Coding Policy		
Policy and Procedure		
SUBJECT:	DEPARTMENT:	
Coding Policy 18.0 Venipuncture (CPT Codes 36415	Health Care Services	
and 36416)		
ORIGINAL EFFECTIVE DATE:	DATE(S) REVIEWED/REVISED:	
1/1/2001	03/02, 01/03, 03/04, 01/05, 01/06, 01/07, 01/08,	
	01/09, 01/10, 01/11, 04/11, 01/12, 01/13, 01/14,	
	01/15, 01/16, 01/17, 01/18, 01/19, 01/20, 01/21,	
	01/22, 01/23	
APPROVED BY:	NUMBER: PAGE:	
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SCOPE:

Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as "Company" and collectively as "Companies").

APPLIES TO:

Providence Health Plan Participating Practitioners Non-Participating Practitioners All Lines of Business

POLICY:

Company provides reimbursement for CPT code 36415 (Collection of venous blood by venipuncture). Only one collection fee is allowed per member encounter.

Company also provides reimbursement for HCPCS code G0471 [Collection of venous blood by venipuncture or urine sample by catheterization from an individual in a skilled nursing facility (SNF) or by a laboratory on behalf of a home health agency (HHA)]. Only one collection fee is allowed per member encounter.

HCPCS code G0471 may not be reported on the same date as CPT code 36415 or HCPCS code P9612 (Catheterization for collection of specimen, single patient, all places of service).

CPT code 36416 "Collection of capillary blood specimen (e.g., finger, heel, ear stick)" will not be considered for payment.

PROCEDURE:

- A flat rate of \$3.00 will be paid for CPT code 36415 unless a different rate is specified in the provider's contract.
- A flat rate of \$3.00 will be paid for CPT code 36415 billed by providers who are paid for laboratory services based on Medicare's fee schedule for laboratory services, even if all other services for that provider are paid at a percent of billed charges.
- A flat rate of \$3.00 will be paid for CPT code 36415 billed by non-participating providers for Medicare and OHP members.
- HCPCS code G0471 will be paid using the lab fee schedule reimbursement specified in provider contracts.
- CPT code 36416 will deny as provider responsibility per Providence Health Plan Coding Policy 13.0 (Bundled or Adjunct Services).

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REFERENCE:

CMS/Medicare Rules and Regulations Current Procedural Terminology (CPT) Providence Health Plan Coding Edits