If a conflict arises between a Clinical Payment and Coding Policy ("CPCP") and any plan document under which a member is entitled to Covered Services, the plan document will govern. If a conflict arises between a CPCP and any provider contract pursuant to which a provider participates in and/or provides Covered Services to eligible member(s) and/or plans, the provider contract will govern. "Plan documents" include, but are not limited to, Certificates of Health Care Benefits, benefit booklets, Summary Plan Descriptions, and other coverage documents. BCBSNM may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSNM has full and final discretionary authority for their interpretation and application to the extent provided under any applicable plan documents.

Providers are responsible for submission of accurate documentation of services performed. Providers are expected to submit claims for services rendered using valid code combinations from Health Insurance Portability and Accountability Act ("HIPAA") approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing ("UB") Editor, American Medical Association ("AMA"), Current Procedural Terminology ("CPT®"), CPT® Assistant, Healthcare Common Procedure Coding System ("HCPCS"), ICD-10 CM and PCS, National Drug Codes ("NDC"), Diagnosis Related Group ("DRG") guidelines, Centers for Medicare and Medicaid Services ("CMS") National Correct Coding Initiative ("NCCI") Policy Manual, CCI table edits and other CMS guidelines.

Claims are subject to the code edit protocols for services/procedures billed. Claim submissions are subject to claim review including but not limited to, any terms of benefit coverage, provider contract language, medical policies, clinical payment and coding policies as well as coding software logic. Upon request, the provider is urged to submit any additional documentation.

Onychomycosis Testing

Policy Number: CPCPLAB068

Version 1.0

Plan CMO Approval Date: July 27, 2022

Plan Effective Date: January 1, 2023

Description

BCBSNM has implemented certain lab management reimbursement criteria. Not all requirements apply to each product. Providers are urged to review Plan documents for eligible coverage for services rendered.

Reimbursement Information:

1. Direct microscopic examination with potassium hydroxide, fungal culture of desquamated subungual material, or fungal stain of a nail clipping(s) **may be reimbursable** for individuals with onychomycosis.

2. The use of nucleic acid tests* (See Note 1), including but not limited to PCR, PCR-RFLP, and next-generation sequencing (NGS), to screen for, diagnose, or confirm onychomycosis **is not reimbursable**.

3. The use of attenuated total-reflectance Fourier transform infrared (ATR-FTIR) spectroscopy to screen for, diagnose, or confirm onychomycosis **is not reimbursable**.

4. Testing for the presence of fungal-derived sterols, including but not limited to ergosterol, **is not reimbursable**.

Note 1: Nucleic acid testing of following microorganisms: *Candida* species, *Aspergillus* species, *Trichophyton rubrum, Trichophyton mentagrophytes, Epidermophyton floccossum, Neoscytalidium dimidiatum, Onychocola canadensis, Scopulariopsis* species, *Alternaria* species, *Acremonium* species, and *Fusarium* species (Ameen et al., 2014; Bongomin et al., 2018; Wollina et al., 2016).

Procedure Codes

Codes
82542, 87101, 87149, 87150, 87153, 87205, 87206, 87220, 87480, 87481, 87482, 87798, 87800, 87801, 88312, 88749

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Policy Update History:

1/1/2023	New policy