



A1CNow+® Billing and Reimbursement Procedures

1. CPT Codes (Current Procedural Terminology)

83037 Hemoglobin; glycosylated (A1C) by device cleared by FDA for home use.

A1CNow+ is approved for use with either a capillary or venous blood specimen.¹

36416 Collection of capillary blood specimen (e.g., finger, heel, ear stick).

36415 Collection of venous blood by venipuncture.

Note 1: CPT code 83037 may be billed when an A1C test is performed in a provider's office using a device cleared by the FDA for home use. CPT code 83037 is not intended to report an A1C test result that is obtained in a patient's home by the patient or family or in a clinical laboratory setting.²

Note 2: The QW modifier should be used when coding for Medicare and Medicaid beneficiaries. The QW modifier (83037QW) indicates that the test and laboratory have received a CLIA¹ Certificate of Waiver. A1CNow+ has been categorized as a waived test under CLIA.³

Note 3: CPT code 83037 became available in 2006 and most insurers utilize this new code. Other insurers continue to use 83036. Check with local insurers to confirm the appropriate CPT billing code.

2. E&M Codes⁴ (Evaluation and Management)

- Clinicians/providers determine the appropriate E&M codes for the services rendered to the patient during the office visit
- A1CNow+ test interpretation cannot be billed separately as an evaluation and management service
- Bayer cannot provide guidance and/or interpretation on E&M codes
- For further information on payment for E&M codes, please visit http://www.cms.hhs.gov/pfslookup/O2_PFSsearch.asp

3. International Classification of Disease (ICD-9-CM) Diagnosis Codes

- Clinicians/providers determine the appropriate diagnosis (ICD-9-CM) code based upon the "signs and symptoms" that most accurately describe the patient's condition
- Bayer cannot provide guidance and/or interpretation on diagnosis (ICD-9-CM) codes



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4. Certificate of CLIA Waiver

A1CNow+ is classified as a CLIA waived test by the FDA.³ While a CLIA certificate is required when a clinical laboratory test is performed; the performance of waived category tests, such as A1CNow+, requires only a CLIA Certificate of Waiver. Certificate of Waiver labs must register with Medicare, pay a fee every two years, and agree to follow manufacturer's instructions in performing clinical lab tests. To apply for a Certificate of Waiver:

1. Go to www.cms.hhs.gov/CLIA
 2. Download the CLIA application form (CMS-116)
 3. Follow the instructions provided
 4. Send it to the appropriate state agency. A list of state agency addresses is also available on the internet at www.cms.hhs.gov/CLIA
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5. Claim Delays or Denials

When insurers deny a claim, they generally send a letter listing the reasons for the denial. Inaccurate codes, lack of a QW modifier (for Medicare and Medicaid) and missing information are often the reasons for the claim rejection. In such cases, please correct and resubmit the claim. Insurers may also request that the provider document the medical necessity of the HbA1c test. In this case, the provider may need to submit a letter of medical necessity. For assistance with your billing and coding questions, speak to a case manager at the A1CNow+ Reimbursement Hotline (866-999-1415).

Customer support: 1-800-248-2637 | www.A1CNow.com | Reimbursement hotline: 1-866-999-1415

DISCLAIMER

There is no guarantee that any of the codes noted above will result in coverage or payment, which will be based on patient's condition and the insurer's policies. The information provided is publicly available and is intended to help keep A1CNow+ customers up-to-date on changes in billing for the A1CNow+ test. Because understanding and complying with sometimes complex reimbursement rules vary from insurer to insurer, customers should check with local insurers to confirm that the above information is correct. Continued dialogue with insurers is necessary.

1. Bayer A1CNow+ Professional Procedure Guide, P/N 90821.

2. CPT Assistant, October 2006, Volume 16, Issue 10, Page 15, published by the American Medical Association.

3. Food and Drug Administration. CLIA record K051321 and corresponding 510(k) premarket notification. Available at: <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfCLIA/Detail.cfm?ID=8321>.

4. Medicare Claims Processing Manual. Chapter 12. Physicians and Non-Physician Practitioners. Section 30.6; Evaluation and Management Service Codes. Available at <http://www.cms.hhs.gov/Manuals/IOM/itemdetail.asp?filterType=none&filterByDID=99&sortByDID=1&sortOrder=ascending&itemID=CMS018912&intNumPerPage=10>.

