

Banner Medicare Advantage Reimbursement

Approved In-Office Laboratory Services

This in-office lab list applies to all providers contracted with Banner Medicare Advantage Prime and Plus plans. The laboratory services identified below by CPT code and any subsequent CPT codes may be provided in a contracted physician's office.

All other laboratory services billed by a provider will be denied unless separately prior authorized. For providers in Maricopa, Pinal, and Pima Counties, any laboratory services not on this list need to be performed by Sonora Quest Laboratories.

The following laboratory services will be reimbursed when provided in a physician office.

CPT Code	Description
36415	Blood draw, venipuncture
80048	Basic metabolic panel including total calcium
80053	Comprehensive metabolic panel
80305	Drug test(s), presumptive, direct optical observation
80306	Drug test(s), presumptive, instrument
80307	Drug test(s), presumptive, chemical analyzer
81000	Urinalysis, non-automated with microscopy
81001	Urinalysis, automated with microscopy
81002	Urinalysis, non-automated without microscopy
81003	Urinalysis, automated, without microscopy
81005	Urinalysis
81025	Urine pregnancy test
82270	Occult blood feces
82271	Occult blood other sources
82947	Assay glucose blood, quantitative
82948	Reagent strip/blood glucose
82962	Glucose blood test
84703	Chorionic gonadotropin assay
85018	Blood count, hemoglobin
85025	Complete CBC automated differential WBC
85027	Complete CBC automated
85610	Prothrombin time
86403	Particle agglutination antibody screen
87210	Smear wet mount saline/ink
87220	Tissue exam for fungi
87301	Infec agent antigen detection by immunoassay technique.
87426	Infectious agent antigen detection by immunoassay technique. This is an add-on code. Bill with 87301 if 87301 accurately describes the services performed.
87486	Chlamydia pneumoniae, amplified probe technique
87581	Mycoplasma pneumoniae, amplified probe technique
87635	Infec agent antigen detection (by DNA or RNA) COVID 19, amplified probe technique.

87804	Infectious agent antigen detection by immunoassay with direct optical observation, influenza.
87880	Infectious agent antigen detection by immunoassay with direct optical observation, strep.
88164	Cytopathology, cervical or vaginal, manual screening
U0001	CDC 2019 novel coronavirus real time rt-PCR diagnostic test panel using COVID-19 molecular tests based on the CDC protocol.
U0002	Non-CDC 2019 novel coronavirus, any technique, multiple types or subtypes (includes all targets) using COVID-19 molecular tests developed outside the scope of the CDC protocol.

Note: Coding changes subject to CMS guidelines.