

STATE OF WASHINGTON

DEPARTMENT OF HEALTH

SCREENING AND GENETICS UNIT

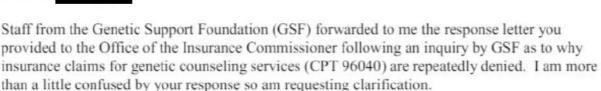
20425 72ND Ave. South, Suite #310, MS K17-12 Kent, Washington 98032

October 23, 2017



OIC Case Number: Provider Name: Case Number: NAIC Number:

Dear Ms



First you state that CPT 96040 is not a covered service because the Centers for Medicare and Medicaid Services (CMS) classifies this code as "Status Indicator B." While this certainly would justify why this is not a covered service for Medicare clients, it is not a blanket denial for the use of this code. In fact, the State of Washington Medicaid program does authorize Genetic Counseling and requires the use of CPT 96040 when billing for these services by a recognized provider. https://www.hca.wa.gov/assets/billers-and-providers/physician-related-serv-bi-20171001.pdf (See page 174). I also consulted with Dr. Dick Whitten from Noridian Healthcare Solutions, the CMS contracted local coverage determination vendor, who confirmed that a CMS distinction of a bundled service does not equate to a blanket denial.

Given that certain genetic counseling services have mandated coverage, namely,

 prenatal diagnosis genetic counseling (RCWs 48.44.344; 48.46.375; 48.21.244 WAC 246-650) and, as required by the Affordable Care Act, genetic counseling for the risk of breast cancer as a Category B classification recommendation by the U.S. Preventive Services Task Force)

my question for you is - how should Genetic Support Foundation, and other genetic service providers, submit insurance claims to

I thank you in advance for your response.

Sincerely,

Debra Lochner Doyle, MS, LCGC State Coordinator for Genetic Services