FUTURE Local Coverage Determination (LCD): Vitamin D Assay Testing (L33556)

Please note: Future Effective Date.

Contractor Information

**Contractor Name**
National Government Services, Inc. opens in new window

**Contract Number**
13201

**Contract Type**
A and B and HHH MAC

**Jurisdiction**
J - K

LCD Information

**LCD ID**
L33556

**LCD Title**
Vitamin D Assay Testing

**Jurisdiction**
New York - Entire State

**Original Effective Date**
For services performed on or after 10/01/2014

**Revision Effective Date**
N/A

**Revision Ending Date**
N/A

**Retirement Date**
N/A

**Notice Period Start Date**
N/A

**Notice Period End Date**
N/A

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CMS National Coverage Policy Language quoted from Centers for Medicare and Medicaid Services (CMS). National Coverage Determinations (NCDs) and coverage provisions in interpretive manuals is italicized throughout the policy. NCDs and coverage provisions in interpretive manuals are not subject to the Local Coverage Determination (LCD) Review Process (42 CFR 405.860[b] and 42 CFR 426 [Subpart D]). In addition, an administrative law judge may not review an NCD. See Section 1869(f)(1)(A)(i) of the Social Security Act.

Unless otherwise specified, italicized text represents quotation from one or more of the following CMS sources:

**Title XVIII of the Social Security Act (SSA):**

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Abstract:

Vitamin D is a hormone, synthesized by the skin and metabolized by the kidney to an active hormone, calcitriol. An excess of vitamin D may lead to hypercalcemia. Vitamin D deficiency may lead to a variety of disorders. This LCD identifies the indications and limitations of Medicare coverage and reimbursement for these services.

Vitamin D is called a "vitamin" because of its exogenous source, predominately from oily fish in the form of vitamin D2 and vitamin D3. It is really a hormone, synthesized by the skin and metabolized by the kidney to an active hormone, calcitriol, which then acts throughout the body. In the skin, 7-dehydrocholesterol is converted to vitamin D3 in response to sunlight, a process that is inhibited by sunscreen with a skin protection factor (SPF) of 8 or greater. Once in the blood, vitamin D2 and D3 from diet or skin bind with vitamin D binding protein and are carried to the liver where they are hydroxylated to yield calcidiol. Calcidiol then is converted in the kidney to calcitriol by the action of 1α-hydroxylase (CYP27B1). The CYP27B1 in the kidney is regulated by nearly every hormone involved in calcium homeostasis, and its activity is stimulated by PTH, estrogen, calcitonin, prolactin, growth hormone, low calcium levels, and low phosphorus levels. Its activity is inhibited by calcitriol, thus providing the feedback loop that regulates calcitriol synthesis.

An excess of vitamin D is unusual, but may lead to hypercalcemia. Vitamin D deficiency may lead to a variety of disorders, the most infamous of which is rickets. Evaluating patients' vitamin D levels is accomplished by measuring the level of 25-hydroxyvitamin D. Measurement of other metabolites is generally not medically necessary.

Indications:

Measurement of vitamin D levels is indicated for patients with:

- chronic kidney disease stage III or greater;
- osteoporosis;
- osteomalacia;
- osteopenia;
- hypocalcemia;
- hypercalcemia;
- hypoparathyroidism;
- hyperparathyroidism;
- rickets; and
- vitamin D deficiency to monitor the efficacy of replacement therapy.

Limitations:

For Medicare beneficiaries, screening tests are governed by statute. Vitamin D testing may not be used for routine screening.

Once a beneficiary has been shown to be vitamin D deficient, further testing is medically necessary only to ensure adequate replacement has been accomplished. Thereafter, annual testing may be appropriate depending upon the indication and other mitigating factors.
**Bill Type Codes:**

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

- 011x Hospital Inpatient (Including Medicare Part A)
- 012x Hospital Inpatient (Medicare Part B only)
- 013x Hospital Outpatient
- 014x Hospital - Laboratory Services Provided to Non-patients
- 018x Hospital - Swing Beds
- 021x Skilled Nursing - Inpatient (Including Medicare Part A)
- 022x Skilled Nursing - Inpatient (Medicare Part B only)
- 023x Skilled Nursing - Outpatient
- 071x Clinic - Rural Health
- 072x Clinic - Hospital Based or Independent Renal Dialysis Center
- 073x Clinic - Freestanding
- 077x Clinic - Federally Qualified Health Center (FQHC)
- 085x Critical Access Hospital

**Revenue Codes:**

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory; unless specified in the policy services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

Revenue codes only apply to providers who bill these services to the Part A MAC. Revenue codes do not apply to physicians, other professionals and suppliers who bill these services to the Part B MAC.

Please note that not all revenue codes apply to every type of bill code. Providers are encouraged to refer to the FISS revenue code file for allowable bill types. Similarly, not all revenue codes apply to each CPT/HCPCS code. Providers are encouraged to refer to the FISS HCPCS file for allowable revenue codes.

All revenue codes billed on the inpatient claim for the dates of service in question may be subject to review.

- 0300 Laboratory - General Classification
- 0301 Laboratory - Chemistry
- 0309 Laboratory - Other Laboratory

**CPT/HCPCS Codes**

**Group 1 Paragraph:** N/A

**Group 1 Codes:**

82306 VITAMIN D; 25 HYDROXY, INCLUDES FRACTION(S), IF PERFORMED

**ICD-10 Codes that Support Medical Necessity**

**Group 1 Paragraph:** The correct use of an ICD-10-CM code listed below does not assure coverage of a service. The service must be reasonable and necessary in the specific case and must meet the criteria specified in this determination.

**Group 1 Codes:**

<table>
<thead>
<tr>
<th>ICD-10 Codes</th>
<th>Description</th>
</tr>
</thead>
</table>

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ICD-10 Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>E20.0</td>
<td>Idiopathic hypoparathyroidism</td>
</tr>
<tr>
<td>E20.8</td>
<td>Other hypoparathyroidism</td>
</tr>
<tr>
<td>E20.9</td>
<td>Hypoparathyroidism, unspecified</td>
</tr>
<tr>
<td>E21.0</td>
<td>Primary hyperparathyroidism</td>
</tr>
<tr>
<td>E21.1</td>
<td>Secondary hyperparathyroidism, not elsewhere classified</td>
</tr>
<tr>
<td>E21.2</td>
<td>Other hyperparathyroidism</td>
</tr>
<tr>
<td>E21.3</td>
<td>Hyperparathyroidism, unspecified</td>
</tr>
<tr>
<td>E55.0</td>
<td>Rickets, active</td>
</tr>
<tr>
<td>E55.9</td>
<td>Vitamin D deficiency, unspecified</td>
</tr>
<tr>
<td>E83.30</td>
<td>Disorder of phosphorus metabolism, unspecified</td>
</tr>
<tr>
<td>E83.31</td>
<td>Familial hypophosphatemia</td>
</tr>
<tr>
<td>E83.32</td>
<td>Hereditary vitamin D-dependent rickets (type 1) (type 2)</td>
</tr>
<tr>
<td>E83.39</td>
<td>Other disorders of phosphorus metabolism</td>
</tr>
<tr>
<td>E83.51</td>
<td>Hypocalcemia</td>
</tr>
<tr>
<td>E83.52</td>
<td>Hypercalcemia</td>
</tr>
<tr>
<td>E89.2</td>
<td>Postprocedural hypoparathyroidism</td>
</tr>
<tr>
<td>M81.0</td>
<td>Age-related osteoporosis without current pathological fracture</td>
</tr>
<tr>
<td>M81.6</td>
<td>Localized osteoporosis [Lequesne]</td>
</tr>
<tr>
<td>M81.8</td>
<td>Other osteoporosis without current pathological fracture</td>
</tr>
<tr>
<td>M83.0</td>
<td>Puerperal osteomalacia</td>
</tr>
<tr>
<td>M83.1</td>
<td>Senile osteomalacia</td>
</tr>
<tr>
<td>M83.2</td>
<td>Adult osteomalacia due to malabsorption</td>
</tr>
<tr>
<td>M83.3</td>
<td>Adult osteomalacia due to malnutrition</td>
</tr>
<tr>
<td>M83.4</td>
<td>Aluminum bone disease</td>
</tr>
<tr>
<td>M83.5</td>
<td>Other drug-induced osteomalacia in adults</td>
</tr>
<tr>
<td>M83.8</td>
<td>Other adult osteomalacia</td>
</tr>
<tr>
<td>M83.9</td>
<td>Adult osteomalacia, unspecified</td>
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<tr>
<td>M85.9</td>
<td>Disorder of bone density and structure, unspecified</td>
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<tr>
<td>M89.9</td>
<td>Disorder of bone, unspecified</td>
</tr>
<tr>
<td>M94.9</td>
<td>Disorder of cartilage, unspecified</td>
</tr>
<tr>
<td>N18.3</td>
<td>Chronic kidney disease, stage 3 (moderate)</td>
</tr>
<tr>
<td>N18.4</td>
<td>Chronic kidney disease, stage 4 (severe)</td>
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<tr>
<td>N18.5</td>
<td>Chronic kidney disease, stage 5</td>
</tr>
<tr>
<td>N18.6</td>
<td>End stage renal disease</td>
</tr>
<tr>
<td>N25.81</td>
<td>Secondary hyperparathyroidism of renal origin</td>
</tr>
</tbody>
</table>

ICD-10 Codes that DO NOT Support Medical Necessity N/A
ICD-10 Additional Information

General Information

Associated Information

Documentation Requirements:

The patient's medical record must contain documentation that fully supports the medical necessity for services included within this LCD. (See "Indications and Limitations of Coverage.") This documentation includes, but is not limited to, relevant medical history, physical examination, and results of pertinent diagnostic tests or procedures.

Appendices:

Not applicable

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Utilization Guidelines:

Not applicable

Sources of Information and Basis for Decision
This bibliography presents those sources that were obtained during the development of this policy. National Government Services is not responsible for the continuing viability of Web site addresses listed below.


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**Revision History Information**

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**Associated Documents**

Attachments N/A

Related Local Coverage Documents Article(s) A52872 - *Vitamin D Assay Testing - Supplemental Instructions*

Article opens in new window

Related National Coverage Documents N/A

Public Version(s) Updated on 04/02/2014 with effective dates 10/01/2014 - N/A Back to Top

**Keywords**

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