

November
2023



Client Communication

Medicare Local Coverage Determination Policy: CGS

Coverage Policy

L34037 – Flow Cytometry

CPT: 88182, 88184, 88185, 88187, 88188, 88189, 86355, 86356, 86357, 86359, 86360, 86361, 86367

Revision Effective Date: 03/02/2023

Coverage Indications, Limitations, and/or Medical Necessity

Abstract:

Flow cytometry is a rapid and convenient technique for generating immunophenotypic data. A flow cytometer measures multiple properties of cells suspended in a moving fluid medium. As each particle passes single-file through a laser light source, it produces a characteristic light pattern that is measured by multiple detectors for scattered light (forward and 90 degrees) and fluorescent light (if the cell is stained with a fluorochrome). Statement of coverage – This LCD describes CGS indications and limitations of coverage.

Indications:

The diagnosis and classification of hematopoietic neoplasms, including assessment of biologic parameters associated with prognosis, detection of antigens used as therapeutic targets and detection of residual neoplastic cells following therapy.

It is also useful to monitor lymphocyte populations in patients with HIV infection; to monitor lymphocyte subpopulations in post transplant patients on immunosuppressive therapy; to identify disease specific cell antigens when complementing other diagnostic methods which may fail to yield a diagnosis [e.g., CD59 in paroxysmal nocturnal hemoglobinuria (PNH)]; and to determine CD34 count for stem cell transplant purposes.

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Diagnosis codes must be applicable to the patient's symptoms or conditions and must be consistent with the patient's medical record. Sonic Healthcare does not recommend any diagnosis codes and will only submit diagnosis information provided to us by the ordering physician or his/her designated staff.

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The ICD10 codes listed below are the top 40 diagnosis codes Sonic most commonly receives from ordering physicians for this limited-coverage test. Medicare supports provider utilization of all the diagnosis codes listed below, except those notated in bold. **If you are providing a diagnosis code that is bolded below, please submit a valid ABN form with the order.** To view the complete policy and the full list of medically supported diagnosis codes, please refer to the CMS website for guidance:

<https://www.cms.gov/medicare-coverage-database/search.aspx>

Codes	Description
E55.9	Vitamin D deficiency, unspecified
D50.9	Iron deficiency anemia, unspecified
E03.9	Hypothyroidism, Unspecified
E34.9	Endocrine disorder, unspecified
R73.09	Other abnormal glucose
D84.9	Cystic fibrosis, unspecified
E88.9	Metabolic disorder, unspecified
E71.30	Disorder of fatty-acid metabolism, unspecified
E61.2	Magnesium deficiency
G72.49	Other inflammatory and immune myopathies, not elsewhere classified
B97.89	Other viral agents as the cause of diseases classified elsewhere
Z13.0	Encounter for screening for diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
D82.3	Immunodeficiency following hereditary defective response to Epstein-Barr virus
Z13.220	Encounter for screening for lipid disorders
Z13.29	Encounter for screening for other suspected endocrine disorder
Z11.9	Encounter for screening for infectious and parasitic diseases, unspecified
E53.8	Deficiency of other specified B group vitamins
Z12.5	Encounter for screening for malignant neoplasm of prostate
R53.83	Other Fatigue
Z01.84	Encounter for antibody response examination
E60	Dietary zinc deficiency
E72.9	Disorder of amino-acid metabolism, unspecified

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E56.9	Vitamin deficiency, unspecified
R73.9	Hyperglycemia, unspecified
E07.9	Disorder of thyroid, unspecified
E61.1	Iron deficiency
E71.41	Primary carnitine deficiency
E83.2	Disorders of zinc metabolism
Z13.1	Encounter for screening for diabetes mellitus
E23.0	Hypopituitarism
E78.00	Pure hypercholesterolemia, unspecified
D46.9	Myelodysplastic syndrome, unspecified
D64.9	Anemia, Unspecified
M06.9	Rheumatoid arthritis, unspecified
B37.82	Candidal enteritis
E78.9	Disorder of lipoprotein metabolism, unspecified
E83.00	Disorder of copper metabolism, unspecified
B96.89	Other specified bacterial agents as the cause of diseases classified elsewhere
D51.9	Vitamin B deficiency anaemia, unspecified
E61.7	Deficiency of multiple nutrient elements

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