

Independent laboratory provider — Place of service 81

Independent laboratory services billed with place of service code 81 are reimbursable to independent laboratory providers who meet the ForwardHealth requirements outlined within the laboratory/pathology provider handbook. Independent laboratory services (place of service 81) must be performed by a Medicaid certified independent laboratory provider. Rendering and/or billing provider listed on independent laboratory claims must accurately represent the provider of service.

As a reminder, independent laboratory providers must have a current, verified, unrevoked and not suspended *Clinical Laboratory Improvement Amendment (CLIA)* certificate or *CLIA* waiver. The laboratory's services and office facilities must be available to other physicians for performing diagnostic tests. The *CLIA* 10-digit certification identification number must be listed on the claim form:

- The *CLIA* number must be placed in item 23 of the *CMS-1500* claim form. Electronic submitters using the ANSI X12 **5010** version should use **2300** and or **2400** REF02 (X4).
- Lab/pathology services that are on the *CLIA* waived test list provided by CMS must be billed with a QW modifier (if the procedure does not have a unique CPT® or HCPCS code). CMS provides an updated list of waived tests on a quarterly basis that can be found here: <https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/Downloads/waivetbl.pdf>.
- *CLIA* waived tests still require the provider to include their *CLIA* number on the claim.

Please refer to the ForwardHealth website for guidance:

independent laboratory specialty –

<https://www.forwardhealth.wi.gov/WIPortal/Subsystem/Public/ProcedureLicenseAgreement.aspx>

<https://mediproviders.anthem.com/wi>

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