

Provider Bulletin

Molina Healthcare of Virginia, Inc.

December 11, 2024

Clarification on Presumptive and Definitive Drug Testing Limitations

Dear Valued Provider,

We are reaching out to clarify the Definitive and Presumptive Drug Testing limitations communicated in November 2024. Please carefully review the updated guidelines below to ensure that you remain compliant and make the most effective use of our services.

The revised guidelines explicitly outline the annual and same-day limitations of Definitive Drug Testing. Adhering to these guidelines is crucial for delivering high-quality care to our members while optimizing drug testing resources.

CMS sets limits on definitive drug testing. Please review the following limitations carefully:

[Controlled Substance Monitoring and Drugs of Abuse Testing](#)

[Billing and Coding: Urine Drug Testing Policy](#)

Annual Definitive Drug Testing Limitations:

A sample schedule for urine screening begins with weekly tests for four to six weeks, but no more than three times per week. After this initial period, the schedule is adjusted to biweekly or every three weeks for another four to six weeks. Once the patient is stable on buprenorphine, screenings transition to a monthly basis, in some cases, an individualized clinical review may be necessary to determine if exceeding these limits is justified.

- **Coverage:** These limits apply across all lines of business.
- **Member Consistency:** Claims must pertain to the same member, with the same Plan ID across all claims.
- **CPT Codes:**
 - **Medicaid:** Specific CPT codes apply. G0480, G0481, G0482, G0483, G0659
 - **Medicare:** Includes a broader range of specific CPT codes plus additional codes: G0480, G0481, G0482, G0483, G0659, 0007U, 0011U, 0051U, 0082U, 0143U, 0144U, 0145U, 0146U, 0147U, 0148U, 0149U, 0150U
 - **All lines of business:** 80320 – 80331, 80339 – 80341, 80345 – 80377, 83992

Same-Day Definitive Drug Testing Limitations:

- **Daily Limits:** Only one code may be billed per patient per day and plan ID.
- **Coverage:** These limits apply across all lines of business.
- **Member Consistency:** Billed at one unit regardless of the provider.
- **CPT Codes:** This applies to claims where specific CPT codes have been billed more than once for the same service date for the same member.
 - **Includes:**
 - G0480, G0481, G0482, G0483, G0659
 - 80320 – 80331
 - 80339 – 80341
 - 80345 – 80377, 83992

Same -Day Presumptive and Definitive Drug Testing Limitations

- **Includes:**
 - **All Lines of Business**
 - **All Form Types**
 - **Presumptive Drug testing**
 - 80305, 80306, 80307
 - **Definitive Drug testing (Overpaid Claim)**
 - G0481, G0482, G0483, 83992
 - 80320 – 80331
 - 80339 – 80341
 - **80345 – 80377, Claims matching with the following information**
 - Same Member
 - Same Pay to Provider NPI
 - Same Pay to Provider TIN
 - Same Form type
 - Same claim Plan ID
 - Same Date of service
 - **One of the following:**
 - Greater than 1 presumptive (CPT or UNITS) billed with definitive CPT
 - Greater than 1 definitive (CPT or UNITS) billed with presumptive CPT

Adherence to these limitations is essential. Anything above the limit would require pre-certification from Utilization Management. Please review your billing practices.

To ensure compliance, claims that do not meet these criteria will be subject to denial. This means that if a claim does not meet the specified limitations, it will not be reimbursed. This approach helps us manage healthcare resources effectively and ensures that drug testing services are used appropriately.

Questions?

We appreciate your attention to this matter. If you have any questions, please contact Molina's Provider Contact Center at **(800) 424-4518** or your dedicated Molina Provider Services representative at MolinaVA.ProviderInquiry@molinahealthcare.com. We are here to assist you in navigating these guidelines to ensure seamless and effective care for our members.

Thank you,

Molina Healthcare of Virginia