

CPT Code Add Request Form

This form is to be used when requesting the addition of a laboratory CPT code to the payable list of lab codes for physician offices. Requests for inclusion are reviewed quarterly.

Contact information

Date: _____

Requesting office: _____

TIN: _____

Contact person: _____

Phone number: _____

E-mail address: _____

Required information

I am requesting the addition of CPT code _____ to the payable list of lab tests for physician offices.

CPT code description:

Will the test(s) requested provide immediate results? (circle one) YES NO

Rationale as to why an immediate clinical decision is needed. (Provide written clinical documentation or attach supporting evidence as to why an immediate decision is needed. Without this documentation your request will be denied.)

Guiding principles

- Tests are included on the payable physician lab list when they are needed for an immediate clinical decision (e.g. strep test or glucose level). These tests can impact the course of treatment for a member. A cholesterol test is not necessary for an immediate clinical decision and a culture cannot provide information for an immediate clinical decision because the test takes a minimum of 24 hours.
- If codes are approved, it will be for a future effective date and not retroactively paid.

Forward this form to your Priority Health representative for consideration.