



**BlueCross BlueShield
of Texas**

HMO Blue® Texas Outpatient Clinical Reference Lab Services

For physicians located in the following counties, the lab services that will be reimbursed on a fee-for-service basis if performed in the physician's office for HMO Blue Texas members will be updated effective 7/1/2004.

Austin	Jim Wells
Atascosa	Johnson
Bell	Kaufman
Bexar	Lavaca
Brazoria	Leon
Brazos	Liberty
Calhoun	Madison
Chambers	Matagorda
Collin	McLennan
Colorado	Medina
Comal	Montague
Cooke	Montgomery
Dallas	Nueces
Denton	Orange
Ellis	Parker
Fannin	Polk
Fort Bend	Robertson
Galveston	Rockwall
Gonzales	San Jacinto
Grayson	Somervell
Grimes	Tarrant
Guadalupe	Trinity
Hardin	Victoria
Harris	Walker
Hood	Waller
Houston	Washington
Hunt	Wharton
Jackson	Wilson
Jefferson	Wise

NOTE: HMO Blue Texas physicians who are contracted/affiliated with a capitated IPA/Medical Group must contact the IPA/Medical Group regarding outpatient laboratory services.

The current and revised STAT Lab Services lists follow.



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STAT Lab Services

The following lab services will be reimbursed on a fee-for-service basis if performed in the physician's office for HMO Blue Texas members.

Test Description	CPT Code
Basic metabolic panel	80048
Electrolyte panel	80051
Urinalysis, dipstick	81000
Urinalysis, with microscopy, automated	81001
Urinalysis, without microscopy, non-automated	81002
Urinalysis, without microscopy, automated	81003
Urinalysis, bacteriuria screen, except by culture or dipstick	81007
Pregnancy test, urine	81025
Stool for occult blood (Hemoccult)	82270
Glucose, blood, quantitative	82947
Glucose, blood, monitoring device	82962
Blood count, differential WBC, automated	85004
Blood count, smear, WBC differential, manual	85007
Blood count, smear, no WBC differential	85008
Blood count, spun microhematocrit	85013
Blood count, hematocrit	85014
Blood count, hemoglobin	85018
Blood count, complete CBC & WBC differential, automated	85025
Blood count, complete CBC, automated	85027
Blood count, manual, each	85032
Blood count, platelet, automated	85049
Prothrombin time	85610
Heterophile antibody screen for mononucleosis	86308
Wet mount for infectious agents	87210
Tissue exam by KOH slide	87220
Strep screening, qualitative	87430
Strep screening, rapid	87880

Note: Venipunctures will be reimbursed when performed in the physician's office.

Effective 9/1/2003 to 6/30/2004



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STAT Lab Services

The following lab services will be reimbursed on a fee-for-service basis if performed in the physician's office for HMO Blue Texas members.

Test Description	CPT Code
Basic metabolic panel	80048
Electrolyte panel	80051
Urinalysis, dipstick	81000
Urinalysis, with microscopy, automated	81001
Urinalysis, without microscopy, non-automated	81002
Urinalysis, without microscopy, automated	81003
Urinalysis, bacteriuria screen, except by culture or dipstick	81007
Pregnancy test, urine	81025
Stool for occult blood (Hemoccult)	82270
Glucose, blood, quantitative	82947
Glucose, blood, reagent strip	82948
Glucose, blood, monitoring device	82962
Bleeding time	85002
Blood count, differential WBC, automated	85004
Blood count, smear, WBC differential, manual	85007
Blood count, smear, no WBC differential	85008
Blood count, spun microhematocrit	85013
Blood count, hematocrit	85014
Blood count, hemoglobin	85018
Blood count, complete CBC & WBC differential, automated	85025
Blood count, complete CBC, automated	85027
Blood count, manual, each	85032
Blood count, platelet, automated	85049
Coagulation time, Lee and White	85345
Coagulation time, Land White, activated	85347
Coagulation time, Lee and White, other methods	85348
Prothrombin time	85610
Heterophile antibody screen for mononucleosis	86308
Wet mount for infectious agents	87210
Tissue exam by KOH slide	87220
Influenza	87400
Strep screening, qualitative	87430
Strep screening, rapid	87880

Note: Venipunctures will be reimbursed when performed in the physician's office.

Effective 7/1/2004

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