

Venipuncture

Origination Date: 04/01/2025

Last Review: 04/01/2025

Next Review: 04/2026

Description

Venipuncture and collection of blood specimens for laboratory testing along with laboratory handling services occur in the professional and facility settings.

Policy

This policy describes reimbursement of venipuncture, capillary blood specimen from an access device or catheter, and laboratory handling services when billed on professional or facility claims.

Reimbursement Guidelines

Professional

Consistent with CMS, only one collection fee for each type of specimen per patient encounter, regardless of the number of specimens drawn, will be allowed.

Venous blood collection by venipuncture and capillary blood specimen collection will be reimbursed once per patient per date of service when reported by the same provider, except as follows:

- Oscar will deny venipuncture (36400, 36405, 36406, 36410, 36415, or 36416) when billed by the same provider on a professional claim on the same day as Evaluation and Management codes 99202-99205 or 99211-99215.
- Oscar will deny collection of blood specimens (36591, 36592) on a professional claim when reported with more than just laboratory services (80000-89999).

Oscar considers the handling, conveyance, and/or travel allowance for the pickup of a laboratory specimen to be included in a provider's management of a patient. Therefore, codes 99000, 99001, P9603, or P9604 are not eligible for separate reimbursement.

Facility

Oscar considers venipuncture and collection of blood specimens from an access device or catheter as included in the facility payment and is not allowed for separate reimbursement. Therefore, Oscar will deny venipuncture (36400, 36405, 36406, 36410, 36415, 36416, 36591, or 36592) when billed on a facility claim.

Additionally, Oscar considers the handling, conveyance, and/or travel allowance for the pickup of a laboratory specimen to be included in a facility's management of a patient. Therefore, codes 99000, 99001, P9603, or P9604 are not eligible for separate reimbursement.

Telehealth

Oscar will not reimburse venipuncture or collection of blood specimens from an access device or catheter (36400, 36405, 36406, 36410, 36415, 36416, 36591, or 36592) when reported with a telehealth place of service (02, 10).

References

1. CMS Internet Only Manuals, Medicare Claims Processing Manual, Ch. 16 - Laboratory Services
2. American Medical Association, Current Procedural Terminology (CPT®)
3. Healthcare Common Procedure Coding System (HCPCS)

Publication History

Date	Action/Description
04/01/2025	Original Documentation, Governance Approved, Policy Effective.