



# Client Update

SEPTEMBER 2020

Test Name

Test Code

Effective Date

## New Lab Reporting Requirements for COVID-19 Effective: Immediately

Laboratory test information plays a crucial role in the public health response to the COVID-19 pandemic. The information below outlines some important new reporting requirements for laboratories which includes changes regarding the ordering of all COVID-19 testing. These data, required by the Department of Health and Human Services (HHS), will contribute to understanding COVID-19's impact and testing coverage and can contribute to the identification of supply chain issues for reagents and other materials.

All providers who order COVID-19 testing, collect a specimen, or perform a laboratory test must make every reasonable effort to collect complete demographic information as well as responses to a series of "ask on order entry" (AOE) questions. Including these data with test orders enable the laboratories that perform the test to report the information to state and jurisdictional health departments, as required. When information is not available, the healthcare providers (or their designees) who ordered the COVID-19 test and laboratories performing those tests should consider leveraging other information sources to obtain these data (e.g., health information exchanges, employee records, school records).

In an effort to expedite the ordering process, BioReference has loaded all necessary AOE's into the electronic ordering platform, Insight DX. In addition, a new paper requisition has been created with the AOE's pre-printed just below the demographic information. Custom requisitions and pre-prints for COVID-19 testing will not be available.

Please see below for a list of questions that should be completed and submitted with the specimen:

1. IS THIS THE PATIENT'S FIRST TEST?
2. IS THE PATIENT EMPLOYED IN HEALTHCARE?
3. IS THE PATIENT SYMPTOMATIC AS DEFINED BY CDC?
4. IF YES TO QUESTION 3, PLEASE PROVIDE DATE OF SYMPTOM ONSET MM/DD/YY
5. IS THE PATIENT HOSPITALIZED?
6. IF YES TO QUESTION 5, IS THE PATIENT IN THE ICU?
7. IS THE PATIENT A RESIDENT IN A CONGREGATE CARE SETTING?
8. IS THE PATIENT PREGNANT?

The submission of this information is valuable to track COVID-19 outbreaks and trends in an effort to control the spread of COVID-19 and bring the pandemic under control. Your assistance in the effort is much appreciated.



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**Alpha-Galactosidase, Leukocytes** **3482** **Effective Immediately**  
 Due to changes made at our referral laboratory, reference ranges for Alpha-Galactosidase, Leukocytes have been updated. Please refer to table below for changes

|                         | Previous Test Information | New Test Information |
|-------------------------|---------------------------|----------------------|
| <b>Preferred Volume</b> | 7mL                       | 6mL                  |
| <b>Minimum Volume</b>   | 7mL                       | 2mL                  |
| <b>Reference Range</b>  | >=23.1 nmol/h/mg          | >=10.32 nmol/h/mg    |
| <b>List Price</b>       | 363.66                    | 408.9                |

**Carboxyhemoglobin, (CO), Quant.** **0544** **Effective Immediately**  
 Due to changes made at our referral laboratory, reference ranges for Carboxyhemoglobin, (CO), Quant. have been updated. **Reference range <=12** will no longer appear on the report. Please refer to table below for changes

**Note: The following chart will be on the report**

|                   |      |                |
|-------------------|------|----------------|
| Non-Smoker        | <2   | % of total Hgb |
| Average Smoker    | 4-5  | % of total Hgb |
| Heavy Smoker      | 8-12 | % of total Hgb |
| Potentially Toxic | >15  | % of total Hgb |

**Throat Culture, R/O Group A Strep. ONLY** **TJ06** **8/24/2020**

Group A beta hemolytic Streptococcus (GAS) is an important pathogen that causes pharyngitis. A throat culture is performed by using a throat swab to detect the presence of group A streptococcus bacteria, the most common cause of strep throat. These bacteria also can cause other infections, including scarlet fever, abscesses, and pneumonia.

|                                   | New/Alternate Test Information  |
|-----------------------------------|---|
| <b>Specimen Requirements</b>      | ES, CUL, SCB  |
| <b>Minimum Volume</b>             | One swab  |
| <b>Turn Around Time*</b>          | 3 days  |
| <b>Transportation Temperature</b> | 2-8 °C  |
| <b>Stability</b>                  | 5 days  |
| <b>Methodology</b>                | Bacterial Culture   |
| <b>Reference Range</b>            | Negative for GAS (Group A Strep.)   |
| <b>Collection Instructions</b>    | Collect specimen with swab then place swab into transport carrier; Label with name and source |
| <b>CPT Code(s)**</b>              | 87070   |
| <b>Price</b>                      | \$62.40   |



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|  |             |                   |
|--|-------------|-------------------|
| <b>Urine Culture, Prenatal, W/ GBS</b> | <b>TH76</b> | <b>08/14/2020</b> |
|--|-------------|-------------------|

GBS is found in the urine of 2%–7% of pregnant women. GBS bacteriuria in a pregnant woman is a marker for heavy genital tract colonization, and maternal GBS bacteriuria (including pure and predominant growth of GBS in the urine) has been associated with GBS colonization and an increased risk for early-onset disease in the newborn. Routine screening for asymptomatic bacteriuria is recommended in pregnant women.

| New/Alternate Test Information    |  |
|-----------------------------------|--|
| <b>Specimen Requirements</b>      | UGY, UAR, UBOR, USC  |
| <b>Minimum Volume</b>             | 5-10 mL  |
| <b>Turn Around Time*</b>          | 4 days   |
| <b>Transportation Temperature</b> | 2-8 °C   |
| <b>Stability</b>                  | 4 days   |
| <b>Methodology</b>                | Bacterial Culture  |
| <b>Reference Range</b>            | No Growth  |
| <b>Collection Instructions</b>    | Perform a clean catch process, collect urine in sterile container, transfer 5-10 ml into the special grey top tube, and label with patient's name. |
| <b>CPT Code(s)**</b>              | 87086  |
| <b>Price</b>                      | \$45.00  |

|   |            |            |
|---|------------|------------|
| <b>REMINDER- Customer Satisfaction Survey</b> | <b>N/A</b> | <b>N/A</b> |
|---|------------|------------|

To help us continually improve our services, we ask that our valued clients complete a customer satisfaction survey. Please visit: [bit.ly/BRCS2020](http://bit.ly/BRCS2020) to take the survey. Completing this survey should only take about 5 minutes. Thank you in advance for your participation!

**NOTES:**

To subscribe to receive client updates via email, please visit <http://bioreferencelabs.bioreference.com/go-green>

\* TAT is based upon receipt of the specimen at the laboratory.

\*\*CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.