

Client Update

JULY 2021

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Test Name	Test Code	Effective Date
Coverage – UHC PLN	NA	July 1
<p>BioReference Laboratories Inc., and its subsidiaries and divisions, are pleased to announce they have been selected for renewal in the UnitedHealthcare® Preferred Laboratory Network for the third year, effective July 1, 2021.</p> <p>The UnitedHealthcare Preferred Laboratory Network is an exclusive group of laboratories that have proven the ability to perform to rigorous standards, and ensures UnitedHealthcare members receive more from their laboratory when choosing BioReference GenPath GeneDx. With easy-to-use digital solutions and diagnostic tools that empower confident healthcare decisions, our clients and patients can be confident they're receiving high quality experiences, healthier outcomes and affordable care from a trusted laboratory.</p> <p>BioReference is pleased to continue to be an in-network provider with major health plans and hundreds of regional plans, including:</p> <ul style="list-style-type: none">• UnitedHealthcare• Humana• Aetna• Cigna• Anthem <p>For a complete list of health plans contracted with BioReference, please visit https://www.bioreference.com/physicians/why-bioreference/insurance-coverage/</p>		
Customer Satisfaction Survey	N/A	Immediately
<p>We invite you to share your feedback and opinions by participating in our 2021 Customer Satisfaction Survey. As a token of our appreciation for completing this survey, you will be entered into a drawing for the chance to win a one year subscription to Amazon Prime or Shipt Delivery. The drawing will be on Monday, August 2, 2021. Your entry will remain separate from your survey responses to protect your anonymity. Completing this survey should take you approximately 5 minutes. Thank you for your time and we wish you luck in the drawing.</p> <p>Please visit: https://www.bioreference.com/customersurvey to take the survey.</p> <p>Note: Employees of BioReference and their relatives are not eligible to participate.</p>		
Amino Acid Analysis, LC/MS, Urine (NY only) & Amino Acid Analysis, LC/MS, Urine (Non-NY)	TG60 0167	Immediately
<p>Due to changes at our reference laboratory, Amino Acid Analysis, LC/MS, Urine, NY-Only has been discontinued. The alternative testing is Amino Acid Analysis, LC/MS, Urine (Non-NY), and state restrictions have been removed from this test.</p>		
HIV-1 RNA, Qualitative	0480	Immediately
<p>Due to changes at our reference laboratory, test information for HIV-1 RNA, Qualitative has been updated. Please refer to the table on the next page for changes.</p>		

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Test Name	Test Code	Effective Date
Previous Test Information		New Test Information
Test Name	HIV-1 RNA, Qualitative, TMA	HIV-1 RNA, Qualitative, RT-PCR
Primary Container		Citrated Plasma AND ACD Plasma are no longer acceptable
Minimum Volume	0.6 mL	0.8 mL
Stability	Ambient: N/A Refrigerated: 5 Days Frozen: 32 Days	Ambient: N/A Refrigerated: 5 Days Frozen: 42 Days
Methodology	TMA	RT-PCR

HTLV-I/II Antibody, with Reflex to Confirmation Assay 0266

July 19

Due to changes at our reference laboratory, minimum volume requirements for **HTLV-I/II Antibody, with Reflex to Confirmation Assay** have been updated from 0.3 mL to 0.5 mL.

LAMBDA LT.CHAIN, Quant. 24 hour Urine 3423

Immediately

Due to changes at our reference laboratory test information for **LAMBDA LT.CHAIN, Quant. 24 hour Urine** has been updated. Please refer to the table below for changes.

	Previous Test Information	New Test Information
Methodology	Nephelometry	Immunoturbidimetry
Reference Range	0.24-6.66 mg/L	< or = 3.79 mg/L
CPT Code(s)**	83883	83520

RBC Enzyme Evaluation J092

Immediately

Due to changes at our reference laboratory test information for **RBC Enzyme Evaluation** has been updated. Please refer to the table below for changes.

	Previous Test Information	New Test Information
Profile Components	Erythrocyte Enzyme Interpretation G-6-PD, QN, RBC Pyruvate Kinase, RBC Glucose Phosphate Isomerase, B Hexokinase, B	Erythrocyte Enzyme Interpretation Reviewed By G6PD Enzyme Activity, B PK Enzyme Activity, B Glucose Phosphate Isomerase, B Hexokinase, B Adenylate Kinase, B Phosphofructokinase, B Phosphoglycerate Kinase, B Triosephosphate Isomerase, B Glutathione, B Pyrimidine 5' Nucleotidase, B
CPT Code(s)**	82657; 82955; 84087; 84220	82955, 84087, 84220, 82657 x5, 82978, 83915
List Price	\$790	\$1525

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STAT Testing	N/A	July 6
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BioReference is introducing new procedures for **STAT test requests** to expedite turnaround time while also providing our internal team with enhanced visibility and monitoring of Stat requests and reports. When you need a STAT pick-up, please call Customer Service and select the option for ‘Specimen Pick-up’ during STAT operating hours:

- Mon-Fri - 8AM-3PM
- Sat, Sun and Holidays - 8AM – 1PM

Dispatch will issue a confirmation number for tracking purposes. Please write the confirmation number on the requisition.

Please Note:

- A STAT courier cannot be dispatched if the request for a pick-up is outside the Stat operating hours or outside the eligible Stat service area.
- The option to select “STAT” under the priority field in InsightDx is no longer selectable. Patient Service Centers and In-office Phlebotomists cannot select “STAT” under the priority field when entering test orders for non-clients.

Supersaturation Profile 24 hour Urine	J350	Immediately
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Due to changes at our reference laboratory, reference ranges for **Supersaturation Profile 24 hour Urine** has been updated. Please refer to the table below for changes.

Reference Range	Previous Test Information	New Test Information
	<p>SODIUM 41-227 mmol/24 hours Reference values have not been established for patients < 16 years of age.</p> <p>POTASSIUM 17-77 mmol/24 hours Reference values have not been established for patients < 16 years of age.</p> <p>CALCIUM Males: <250 mg/24 hours Females: <200 mg/24 hours Reference values have not been established for patients < 18 years and > 83 years of age.</p> <p>MAGNESIUM 51-269 mg/24 hours Reference values have not been established for patients < 18 years and > 83 years of age.</p>	<p>SODIUM > or =18 years: 22-328 mmol/24h Reference values have not been established for patients who are less than 18 years of age.</p> <p>POTASSIUM > or =18 years: 16-105 mmol/24h Reference values have not been established for patients who are less than 18 years of age.</p> <p>CALCIUM Males: <250 mg/24 hours Females: <200 mg/24 hours Reference values have not been established for patients who are less than 18 years of age.</p> <p>MAGNESIUM > or =18 years: 51-269 mg/24 hours Reference values have not been established for patients who are less than 18 years of age.</p>
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Test Name	Test Code	Effective Date
	<p>CHLORIDE 40-224 mmol/24 hours Reference values have not been established for patients < 16 years of age.</p> <p>PHOSPHORUS <1,100 mg/24 hours</p> <p>OXALATE 0.11-0.46 mmol/24 hours</p> <p>URIC ACID Diet-dependent: <750 mg/24 hours</p> <p>CREATININE Normal values mg per 24 hours: Males: 955-2936 mg/24 hours Females: 601-1689 mg/24 hours Reference ranges for male and female patients < 18 years and > 83 years of age have not been established</p> <p>The expected urine creatinine excretion per 24 hours: Males: 13-29 mg/kg of body weight/24 hours Females: 9-26 mg/kg of body weight/24 hours Reference ranges for male and female patients < 18 years and > 83 years of age have not been established.</p> <p>Note: To convert to mg/kg of body weight/24 hours, divide the mg/24 hours result by body weight in kg.</p> <p>UREA NITROGEN 5.0-16.0 g/24 hours</p>	<p>CHLORIDE > or =18 years: 34-286 mmol/24h Reference values have not been established for patients who are less than 18 years of age.</p> <p>PHOSPHORUS > or =18 years: 226-1,797 mg/24hours Reference values have not been established for patients who are less than 18 years of age.</p> <p>OXALATE 0.11-0.46 mmol/24 hours 9.7-40.5 mg/24 h</p> <p>URIC ACID Male: > or =18 years: 200-1,000 mg/24h Female: > or =18 years: 250-750 mg/24h Reference values have not been established for patients who are less than 18 years of age.</p> <p>CREATININE Male: > or =18 years: 930-2,955 mg/24h Female: > or =18 years: 603-1,783 mg/24h Reference values have not been established for patients who are less than 18 years of age.</p> <p>UREA NITROGEN > or =18 years: 7-42 g/24h Reference values have not been established for patients who are less than 18 years of age.</p>

* 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.