Attention Physicians and Laboratories Regarding Presumptive and Definitive Drug Screening

Per Nevada Medicaid Billing Guidelines (the Laboratory, Pathology Clinical, provider type 43 Billing Guide), definitive drug testing is only covered to confirm an unexpected result, or to identify drugs or metabolites that cannot be detected on a presumptive drug screen.

Definitive testing should be ordered:

- only after the results of preliminary testing have been reviewed and,
- when appropriate, discussed with the patient and the results of this discussion were not sufficient to answer the clinical concerns that would make definitive testing unnecessary OR
- if a presumptive drug test is not available for the drug or substance for which there is a documented suspicion of abuse or diversion. The definitive test will allow detection if the drug or substance of interest is present in the specimen. Results should impact the treatment plan.

Clinical documentation should identify the specific drug(s)/substances of interest. Clinical rationale for each definitive test ordered and how the results of such testing will be used to guide clinical care (i.e., clinical utility) should be documented.

Documentation needs to include all of the following:

- A signed and dated recipient-specific order for each ordered drug test that provides sufficient information to substantiate each testing panel component performed ("standing orders," "custom profiles" or "orders to conduct additional testing as needed" are insufficiently detailed and cannot be used to verify medical necessity).
- A copy of the test results of any recent Urine Drug Tests (UDTs).
- Rationale for ordering a definitive drug test for each drug class requested.

If the provider of the service is not the prescribing/referring/ordering provider, the provider of the service is required to maintain documentation of the lab results and copies of the order for the drug test. The clinical indication/medical necessity for the test must be documented in either the order or the recipient’s medical record.