Provider Type 43 May Bill for Hereditary Breast and/or Ovarian Cancer Genetic Testing

Effective with dates of service on or after March 15, 2014, provider type 43 (Laboratory, Pathology/Clinical) may bill the following CPT codes for genetic testing for hereditary breast and/or ovarian cancer mutation:

- 81211 (BRCA 1 and BRCA 2 gene analysis)
- 81212 (BRCA 1 and BRCA 2 variants)
- 81213 (BRCA 1 and BRCA 2 uncommon duplication/deletion variants)
- 81214 (BRCA 1 gene analysis)
- 81215 (BRCA 1 known family variant)
- 81216 (BRCA 2 gene analysis; full sequence analysis)
- 81217 (BRCA 2 known family variant)

All of the codes listed above require prior authorization. Reimbursement rates for provider type 43 are available on the DHCFP Rates Unit webpage at [http://dhcfp.nv.gov/RatesUnit.htm](http://dhcfp.nv.gov/RatesUnit.htm).