

Every Woman Counts

According to the Pathology: Chemistry section of the Medi-Cal General Medicine provider manual, the Every Woman Counts (EWC) program provides selected laboratory testing benefits to eligible California women. Claims for services for EWC recipients must include approved ICD-10-CM codes. For your convenience, the approved ICD-10-CM screening and diagnostic codes that support the appropriate CPT®-4 codes as provided by Medi-Cal are listed below. As an added value, we have included the Quest Diagnostics order codes that we believe correspond to the covered benefits of the program.

Quest Diagnostics Order Code & Description

3526-Pap, Conventional

14471-SurePath® Pap
 14499-SurePath® Pap, reflex HPV mRNA E6/E7
 92236-SurePath® Pap, reflex HPV DNA (HR)
 16306- SurePath® Pap and HPV mRNA E6/E7, reflex Genotypes 16, 18/45
 92245- SurePath® Pap and HPV DNA, reflex Genotypes 16, 18

18810-SurePath® Imaging Pap
 18811-SurePath® Imaging Pap, reflex HPV mRNA E6/E7
 92238-SurePath® Imaging Pap, reflex HPV DNA (HR)
 18829- SurePath® Imaging Pap, and HPV mRNA E6/E7, reflex Genotypes 16, 18/45
 92246- SurePath® Imaging Pap and HPV DNA, reflex Genotypes 16, 18
 58315-ThinPrep® TIS Pap
 90934-ThinPrep® TIS, reflex HPV mRNA E6/E7
 92087-ThinPrep® TIS Pap, reflex HPV DNA
 92094- ThinPrep® TIS Pap and HPV DNA, reflex Genotypes 16, 18
 91414- ThinPrep® TIS Pap and HPV mRNA E6/E7, reflex Genotypes 16, 18/45

10676-Non-Gyn Cytology/FNA

3542-Tissue Pathology

31532-HPV DNA (high risk)
 90887-HPV mRNA E6/E7
 Co-testing is permitted for women 30 years and older at 5-year intervals.

19865-HPV Genotypes 16 and 18, Cervical
 91826-HPV Genotypes 16, 18/45

CPT® Code & Description

88164-Cytopathology slides, cervical or vaginal (the Bethesda system); manual screening under physician supervision

88142-Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; manual screening under physician supervision

88175-Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by automated system and manual rescreening or review under physician supervision

(if included in test ordered)
 87624-Infectious agent detection by nucleic acid (DNA or RNA); papillomavirus, human, amplified probe technique

87625-Infectious agent detection by nucleic acid [DNA and RNA]; Human Papillomavirus [HPV], types 16 and 18 only, includes type 45, if performed

88172-Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen(s)
 88173-interpretation and report

88305-Level IV Surgical pathology, gross and microscopic examination
 88307-Level V Surgical pathology, gross and microscopic examination, requiring microscopic evaluation of surgical margins (breast tissue)

87624-Infectious agent detection by nucleic acid (DNA or RNA); papillomavirus, human, amplified probe technique

87625-Infectious agent detection by nucleic acid [DNA and RNA]; Human Papillomavirus [HPV], types 16 and 18 only, includes type 45, if performed

Every Woman Counts (continued)

The diagnosis must be present for the procedure to be paid for and the procedure must be reasonable and medically necessary for that diagnosis. Documentation within the patient's medical record must support the medical necessity for the test(s) provided. For a complete code list of EWC benefits, please refer to pages 19-37 of the Every Woman Counts section in the Medi-Cal Provider Manual available at medi-cal.ca.gov/manual.

Approved Cervical Cancer Screening and Diagnosis ICD-10-CM Codes

A63.0, B20, B97.35, B97.7, C51.8, C53.0, C53.1, C53.8, C53.9, C55, C57.7 – C57.9, C76.3, C80.1, D06.0, D06.1, D06.7, D06.9, D07.0, D07.2, D07.30, D25.0, D26.0, D49.511 – D49.59, N72, N84.0, N84.1, N84.8, N84.9, N85.9, N86, N87.0, N87.1, N87.9, N88.0 – N88.2, N88.4, N88.8, N88.9, N89.0, N89.1, N89.3, N89.4, N89.8, N89.9, N93.0, N93.1, N93.9, N94.10 – N94.12, N94.19, N94.89, N95.0, R10.2, R87.610 – R87.616, R87.619 – R87.625, R87.628, R87.810, R87.811, R87.820, R87.821, Z01.411, Z01.419, Z01.42, Z11.51, Z12.4, Z15.01, Z15.02, Z21, Z40.01, Z40.02, Z78.0, Z80.41, Z80.49, Z85.3, Z85.40 – Z85.44, Z87.410 – Z87.412, Z87.891, Z90.710 – Z90.712, Z90.721, Z90.722, Z90.79, Z92.0, Z92.25

Approved Breast Cancer Screening and Diagnosis ICD-10-CM Codes

C43.52, C44.501, C44.511, C44.521, C44.591, C50.011, C50.012, C50.019, C50.111, C50.112, C50.119, C50.211, C50.212, C50.219, C50.311, C50.312, C50.319, C50.411, C50.412, C50.419, C50.511, C50.512, C50.519, C50.611, C50.612, C50.619, C50.811, C50.812, C50.819, C50.911, C50.912, C50.919, C77.0, C77.3, C79.2, C79.81, D03.52, D04.5, D05.00 – D05.02, D05.10 – D05.12, D05.80 – D05.82, D05.90 – D05.92, D17.1, D17.20 – D17.24, D17.30, D17.39, D17.72, D17.79, D18.01, D22.5, D23.5, D24.1, D24.2, D24.9, D48.5, D48.60 – D48.62, D49.2, D49.3, I80.8, N60.01, N60.02, N60.09, N60.11, N60.12, N60.19, N60.21, N60.22, N60.29, N60.31, N60.32, N60.39, N60.41, N60.42, N60.49, N60.81, N60.82, N60.89, N60.91, N60.92, N60.99, N61.0, N61.1, N62, N63, N64.0 – N64.4, N64.51 – N64.53, N64.59, N64.81, N64.82, N64.89, N64.9, N65.0, Q83.0 – Q83.3, Q83.8, Q83.9, Q85.8, Q85.9, R23.4, R59.0, R59.1, R59.9, R92.0 – R92.2, R92.8, Z12.31, Z12.39, Z15.01, Z15.02, Z15.09, Z17.0, Z17.1, Z77.123, Z77.128, Z77.22, Z77.9, Z78.0, Z78.9, Z79.810, Z79.818, Z79.890, Z80.0, Z80.3, Z80.41, Z80.8, Z80.9, Z85.038, Z85.3, Z85.40, Z85.43, Z85.71, Z85.72, Z85.79, Z85.9, Z90.10 – Z90.13, Z91.89, Z92.3, Z92.89, Z98.82, Z98.86

Approved Colposcopy and Cervical Biopsy ICD-10-CM Diagnosis Codes

C53.0, C53.1, C53.8, C53.9, D06.0, D06.1, D06.7, D06.9, D07.2, D26.0, N87.0, N87.1, N88.0, N89.0, N89.1, N89.3, N89.4, R87.610 – R87.616, R87.619 – R87.625, R87.628, R87.810, R87.811, R87.820, R87.821

Approved HPV (high-risk) ICD-10-CM Diagnosis Codes

N87.0, R87.610, R87.612, R87.615, R87.616 and Z11.51 (R87.612, R87.615, R87.616, and Z11.51 apply to beneficiaries 30 years and older).

Approved HPV Genotypes (16 and 18/45) ICD-10-CM Diagnosis Codes

R87.615, R87.810, and Z11.51 covered only for recipients age 30 and older.

If you have any questions, please contact your Quest Diagnostics sales representative.

The above information serves as a reference tool for laboratory services and is not comprehensive. The ordering provider is responsible for determining the appropriate diagnosis codes for each patient. Diagnosis codes must be applicable to the patient's symptoms or conditions and must be consistent with documentation in the patient's medical record.

The 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.