

Florida Medicaid

Rapid Whole Genome Sequencing Reimbursement

This alert is to remind providers of Florida Medicaid's inclusion of the Rapid Whole Genome CPT codes 81425, 81426, and 81427 on Medicaid's Independent Laboratory Fee Schedule.

Effective January 1, 2024, the Agency for Health Care Administration (Agency) began reimbursing for rapid whole genome sequencing provided to Medicaid recipients who are 20 years of age or younger; have a complex or acute illness of unknown etiology that has not been caused by environmental exposure, toxic ingestion, an infection with normal response to treatment, or trauma, and are receiving inpatient treatment in a hospital ICU or high-acuity pediatric care unit. This service is reimbursed at a rate in addition to the hospital inpatient reimbursement for diagnostic-related group (DRG) payment, in accordance with the 2023 General Appropriations Act.

For-fee-for service (FFS) claims, independent laboratories and hospitals will be reimbursed for rapid whole genome sequencing with a Date of Service on or after January 1, 2024, that have a corresponding inpatient claim billed with revenue code 310 (OPH-PATHOLOGY/GENERAL).

For specific codes and rates **effective January 1, 2025**, for rapid whole genome sequencing, please visit the AHCA website:

[Rule 59G-4.002, Provider Reimbursement Schedules and Billing Codes | Florida Agency for Health Care Administration](#)

FFS claims for rapid whole genome sequencing will pay the additional maximum fee schedule amount listed in the table above in addition to the DRG rate of the approved inpatient claim. Revenue code 310 can still be billed without these CPT codes and will pay the DRG rate only. The 2025 FFS Independent Laboratory Fee Schedule is updated to include these procedure codes and rates. Providers may call the Provider Services Contact Center at 1-800-289-7799, option 7, for billing assistance.

For additional information regarding these changes please visit: Rule 59G-4.150, F.A.C., [Inpatient Hospital Services Coverage Policy](#), and Rule 59G-4.190, F.A.C., [Laboratory Services Coverage Policy](#).

Prior authorizations:

- Authorizations are waived for children in an inpatient setting

Additional questions? Contact our Customer Service line at (855) 322-4076