



Molina Healthcare of Nebraska, Provider Notice

Respiratory Pathogen Panel Testing

11/1/2025

Molina Healthcare of Nebraska is implementing reimbursement guidelines for the use of respiratory pathogen panel testing. This adjustment aligns with CMS guidance and state exceptions.

Effective 1/1/2026, Molina will consider respiratory pathogen panel testing **not** medically reasonable and necessary in the following situation:

- Panels reporting >5 respiratory pathogens are performed in the **outpatient setting**.

Nebraska Medicaid will consider CPT codes 0202U, 0223U, 0225U, 87632 and 87633 (panels reporting > 5 respiratory pathogens) in a facility (UB-04) Emergency Room, Observation and/or Inpatient setting for **reimbursement**.

Reference Links:

<https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=38916>

<https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=38918&ver=8&bc=CAAAAAAAAAAA>

<https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=39027&ver=5>

<https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleid=58575&ver=32&contractorName=6&contractorNumber=all&updatePeriod=1038&sortBy=updated&bc=13>

<https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleid=58741&ver=12&>

<https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=39001>

If you have general questions about this communication, please contact our Provider Relations Team at NEProviderRelations@MolinaHealthcare.com.