

CLIENT UPDATE

BioReference | genpath | LABORATORIO
LABORATORIES | Buena Salud

OPKO Health Companies

January 2019

TEST NAME	TEST CODE	EFFECTIVE DATE	DESCRIPTION									
N/A	N/A	N/A	<p>BioReference Laboratories is pleased to continue to be an in-network provider with most national health plans and hundreds of regional plans, including:</p> <ul style="list-style-type: none"> • United Healthcare • Aetna • Cigna • Anthem • Medicare & Medicaid <p>While some national plans have made changes in their network, these changes DO NOT AFFECT BioReference and its specialty labs, GenPath and GeneDx. BioReference looks forward to providing you and your patients with quality diagnostic services throughout 2019.</p> <p>For a complete list of health plans contracted with BioReference, please visit www.bioreference.com</p>									
All Lithium heparin collected tests	All	February 1, 2019	<p>Beginning January 2019, the laboratory will replace the current 3 mL Green Top Lithium Heparin Tube with a 6 mL Green Top Lithium Heparin Tube. This change will apply to all tests that currently allow lithium heparin (whole blood or plasma) to be submitted.</p> <p>Other than the volume of blood, there are no changes to ordering or collection instructions. We recommend a minimum collection of 5 mL of blood into this tube to allow for all tests for which this tube is allowed.</p> <p>Please call customer service to order the 6 mL Green Top Lithium Heparin Tube. Speedy order #124 will remain the same and will automatically be fulfilled with the 6 mL tube.</p> <table border="1"> <thead> <tr> <th></th> <th>Previous Test Information</th> <th>New Test Information</th> </tr> </thead> <tbody> <tr> <td>Specimen Requirements</td> <td>Lithium heparin 3 mL</td> <td>Lithium heparin 6 mL</td> </tr> <tr> <td>Minimum Volume</td> <td>3 mL</td> <td>5 mL</td> </tr> </tbody> </table>		Previous Test Information	New Test Information	Specimen Requirements	Lithium heparin 3 mL	Lithium heparin 6 mL	Minimum Volume	3 mL	5 mL
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BRAF and EGFR by NGS, if EGFR negative reflex to ALK1 by FISH, if negative reflex to ROS1 by FISH	TB34-4 (Global Only)	November 28, 2018	<p>The laboratory is pleased to now offer BRAF and EGFR by NGS with reflex to ALK and ROS1 by FISH. Please see test information below.</p> <p>KRAS assesses for resistance to anti-EGFR therapy in metastatic colorectal cancer and TKI therapy resistance in lung cancer. BRAF V600E/K mutation analysis is useful in the context of melanoma, colorectal cancer, thyroid cancer, and hairy cell leukemia. Melanoma patients with V600E/K mutations are eligible for treatment with TKI inhibitor therapy. In colorectal cancer, BRAF may be used as a screening assay for MSI-H or unstable patients suspected of Lynch Syndrome. BRAF V600E can aid in the diagnosis of papillary thyroid cancer (PTC) from cytology samples. Numerous studies have shown BRAF to be associated with aggressive clinic-pathologic features of PTC. BRAF can also be used to confirm a diagnosis of Hairy Cell Leukemia.</p>

New Test Information	
Specimen Requirements	Formalin-fixed Paraffin-embedded Tissue
Turn Around Time	10 days
Transportation Temperature	Room Temperature
Methodology	Next-Generation Sequencing (NGS), Fluorescent In-Situ Hybridization (FISH)
Reference Range	Call Lab
Collection Instructions	This comes in block from client with surgical number imprint
CPT Code(s)*	81210x1, 81235x1

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Estrone Sulfate	0281	Immediately	Due to changes at our reference laboratory, test information for Estrone Sulfate has been updated.																											
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JAK2 V617F Mutation Reflex to JAK2 Exon 12, CALR and MPL	TA13-0 Global Only	December 3, 2018	<p>The laboratory is pleased to now offer JAK2 V617F Mutation with Reflex to JAK2 Exon 12, CALR and MPL. Please see test information below.</p> <p>JAK2 V617F mutations account for more than 90% of patients with Polycythemia Vera (PV) and 60% of patients with Essential Thrombocythemia (ET) and Myelofibrosis (MF). Molecular testing for JAK2 V617F is recommended by national guidelines as part of initial workup for all patients suspected for Myeloproliferative Neoplasm (MPN). JAK2 V617F provides intermediate prognosis and higher risk of thrombosis compared to patients with CALR mutations.</p> <table border="1"> <thead> <tr> <th colspan="2">New/Alternate Test Information</th> </tr> </thead> <tbody> <tr> <td>Specimen Requirements</td> <td>Primary: BML - Bone Marrow Lavender Top Alternative: BMG - Bone Marrow Green Top, GPB - Peripheral Blood Green Top, LPB - Peripheral Blood Lavender Top</td> </tr> <tr> <td>Minimum Volume</td> <td>If submitting Peripheral Blood, 5 ml is required</td> </tr> <tr> <td>Turn Around Time</td> <td>3-7 days</td> </tr> <tr> <td>Transportation Temperature</td> <td>Refrigerate</td> </tr> <tr> <td>Methodology</td> <td>Pyrosequencing</td> </tr> <tr> <td>Reference Range</td> <td>Call Lab</td> </tr> <tr> <td>Collection Instructions</td> <td>BML: Place bone marrow into tube, label with patient's name and date of birth. If submitting Peripheral Blood, 5 ml is required; specimen can be sent either RT or refrigerated.</td> </tr> <tr> <td>CPT Code(s)*</td> <td>81270x1</td> </tr> </tbody> </table>	New/Alternate Test Information		Specimen Requirements	Primary: BML - Bone Marrow Lavender Top Alternative: BMG - Bone Marrow Green Top, GPB - Peripheral Blood Green Top, LPB - Peripheral Blood Lavender Top	Minimum Volume	If submitting Peripheral Blood, 5 ml is required	Turn Around Time	3-7 days	Transportation Temperature	Refrigerate	Methodology	Pyrosequencing	Reference Range	Call Lab	Collection Instructions	BML: Place bone marrow into tube, label with patient's name and date of birth. If submitting Peripheral Blood, 5 ml is required; specimen can be sent either RT or refrigerated.	CPT Code(s)*	81270x1
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Electronic Client Update	N/A	Reminder	<p>Please be reminded that monthly client updates are also available to be received via email.</p> <p>To subscribe to receive client updates via email instead of fax, please visit http://bit.ly/BRLiGoGreen</p>
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*** 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.**

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