EVH Clinical Guideline 2720.CC Definitive (Quantitative) Urine Drug Testing

Guideline Number: EVH_CG_2720.CC	Applicable Codes	
"Evolent" refers to Evolent Health LLC and Evolent Specialty Services, Inc. 		
Original Date: January 1, 2022	**Last Revised Date:** August 20, 2026	**Implementation Date:** September 1, 2026

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STATEMENT

General Information

- *It is an expectation that all members receive care/services from a licensed clinician. All appropriate supporting documentation, including recent pertinent office visit notes, laboratory data, and results of any special testing must be provided. If applicable: All prior relevant imaging results and the reason that alternative imaging cannot be performed must be included in the documentation submitted.*
- *Where a specific clinical indication is not directly addressed in this guideline, medical necessity determination will be made based on widely accepted standard of care criteria. These criteria are supported by evidence-based or peer-reviewed sources such as medical literature, societal guidelines, and state/national recommendations.*
- *The guideline criteria in the following sections were developed utilizing evidence-based and peer-reviewed resources from medical publications and societal organization guidelines as well as from widely accepted standard of care, best practice recommendations.*

INDICATIONS

CountyCare considers **Definitive (Quantitative) Urine Drug Testing** medically necessary when all of the following criteria are met [1–3]:

- The member received Presumptive (Qualitative) testing within one week of receiving Definitive (Quantitative) testing
- The provider requires a Definitive (Quantitative) test to achieve at least one of the following:
  - Detect/identify a specific drug, metabolite, or substance
  - To more precisely quantify the concentration level of a specific drug, metabolite, or substance
  - To confirm or refine the accuracy of prior results
- The provider provides documentation stating how the results of Definitive (Quantitative) testing will impact and/or shape treatment planning, such as:
  - The results are medically necessary to inform clinical decisions, such as a change in medication therapy
  - The Presumptive (Qualitative) test is positive for a prescription drug with abuse potential not prescribed to the member
  - The Presumptive (Qualitative) test was inconclusive or inconsistent
  - The Presumptive (Qualitative) test is negative, but the member exhibits signs of relapse
  - The Presumptive (Qualitative) test results are assumed to be positive due to the

member's admission of recent use and the provider needs information regarding the specific substance and quantity use for treatment planning

- The Presumptive (Qualitative) test was positive for an illegal drug or substance
- A member disputes the positive results of a Presumptive (Qualitative) test without indicating that he or she used the substance that led to the positive result

Note: If the confirmatory test is positive and the member is at high risk for addiction, the provider should consider avoiding prescription of opioids and refer to an addiction specialist.

LIMITATIONS FOR DEFINITIVE (QUANTITATIVE) URINE DRUG TESTING

- CountyCare will not reimburse the following:
  - Definitive (Quantitative) tests that are performed as a routine supplement to Presumptive (Qualitative) drug screenings
  - Custom panels that are routinely requested and unrelated to the member's clinical condition
  - Testing in which positive or negative results do not have a clear treatment role or affect treatment decision making
- All UDTs should be performed at an appropriate frequency based on clinical needs. Frequency of testing must take into account the window of detection for the drugs requested on the panel.
- CountyCare will not reimburse Definitive (Quantitative) urine drug testing of more than 14 drugs/drug classes (HCPCS codes G0482, G0483) without prior authorization. Documentation must support medical necessity as defined above, including clarification of the clinical insufficiency of urine drug testing of 13 or less drugs/drug classes (HCPCS codes G0480, G0481).

CODING AND STANDARDS

Codes

Code	Description
G0482	Drug test(s), definitive, utilizing (1) drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers) including, but not limited to, GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (e.g., IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (e.g., alcohol dehydrogenase)); (2) stable isotope

Code	Description
	or other universally recognized internal standards in all samples (e.g., to control for matrix effects, interferences and variations in signal strength); and (3) method or drug- specific calibration and matrix-matched quality control material (e.g., to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 15-21 drug class(es), including metabolite(s) if performed.
G0483	Drug test(s), definitive, utilizing (1) drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers) including, but not limited to, GC/MS (any type, single or tandem) and LC/MS (any type, single or tandem and excluding immunoassays (e.g., IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (e.g., alcohol dehydrogenase)); (2) stable isotope or other universally recognized internal standards in all samples (e.g., to control for matrix effects, interferences and variations in signal strength); and (3) method or drug- specific calibration and matrix-matched quality control material (e.g., to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 22 or more drug class(es), including metabolite(s) if performed.

Applicable Lines of Business

☐	CHIP (Children's Health Insurance Program)
☐	Commercial
☐	Exchange/Marketplace
☒	Medicaid
☐	Medicare Advantage

BACKGROUND

Definitions

- **Presumptive/Qualitative urine drug testing/screening** is used to determine the presence or absence of drugs in a urine sample. A positive test result is conveyed when the drug concentration is above the cut-off value.
- **Definitive/Quantitative/Confirmatory urine drug testing (UDT)** tests for specific

medications, illicit substances, and metabolites. That is, in contrast to Presumptive UDT, Definitive (Quantitative) testing uses highly sensitive laboratory methods that quantify the concentration of specific drugs, metabolites, or substances within the urine sample.

General Information

Urine drug screening/testing is often used in pain management and substance abuse treatment settings to assess and monitor drug misuse and/or abuse of controlled substances. Members in these settings are at risk for abusing or misusing prescribed opioids and/or non-prescribed drugs and should be assessed at the initiation of treatment as well as monitored while they are receiving treatment. Urine drug testing is a widely utilized method for monitoring and racking member compliance and exposing possible drug misuse and abuse.

POLICY HISTORY

Date	Summary
August 20, 2026	• Annual Review - Replaced patient with member in 1st bullet under General Information; removed the number 4 from the first sentence under Indications; format update to References
November 20, 2025	• This guideline replaces PA.207.CC Definitive (Quantitative) Urine Drug Testing (G0482, G0483) • Editorial changes to match the formatting and layout of the new template, no changes to clinical content

LEGAL AND COMPLIANCE

Guideline Approval

Committee

Reviewed / Approved by Evolent Administrative Services Medical Policy Committee

Disclaimer

Evolent Clinical Guidelines do not constitute medical advice. Treating health care professionals are solely responsible for diagnosis, treatment, and medical advice. Evolent uses Clinical Guidelines in accordance with its contractual obligations to provide utilization management. Coverage for services varies for individual members according to the terms of their health care coverage or government program. Individual members' health care coverage may not utilize some Evolent Clinical Guidelines. Evolent clinical guidelines contain guidance that requires prior authorization and service limitations. A list of procedure codes, services or drugs may not be all inclusive and does not imply that a service or drug is a covered or non-covered service or drug.

Evolent reserves the right to review and update this Clinical Guideline in its sole discretion. Notice of any changes shall be provided as required by applicable provider agreements and laws or regulations. Members should contact their Plan customer service representative for specific coverage information.

REFERENCES

1. Jannetto PJ, Bratanow NC, Clark WA, et al. Executive Summary: American Association of Clinical Chemistry Laboratory Medicine Practice Guideline—Using Clinical Laboratory Tests to Monitor Drug Therapy in Pain Management Patients. *J Appl Lab Med*. 2018;2(4):489-526. doi:10.1373/jalm.2017.023341
2. American Society of Addiction Medicine. Appropriate Use of Drug Testing in Clinical Addiction Medicine. Published online 2017:1-56.
3. Raouf M, Bettinger JJ, Fudin J. A Practical Guide to Urine Drug Monitoring. *Fed Pract*. 2018;35(4):38-44.