CLINICAL PAYMENT AND CODING POLICY

If a conflict arises between a Clinical Payment and Coding Policy (CPCP) and any plan document under which a member is entitled to Covered Services, the plan document will govern. If a conflict arises between a CPCP and any provider contract pursuant to which a provider participates in and/or provides Covered Services to eligible member(s) and/or plans, the provider contract will govern. "Plan documents" include, but are not limited to, Certificates of Health Care Benefits, benefit booklets, Summary Plan Descriptions, and other coverage documents. BCBSTX may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSTX has full and final discretionary authority for their interpretation and application to the extent provided under any applicable plan documents.

Providers are responsible for submission of accurate documentation of services performed. Providers are expected to submit claims for services rendered using valid code combinations from Health Insurance Portability and Accountability Act (HIPAA) approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing (UB) Editor, American Medical Association (AMA), Current Procedural Terminology (CPT®), CPT® Assistant, Healthcare Common Procedure Coding System (HCPCS), ICD-10 CM and PCS, National Drug Codes (NDC), Diagnosis Related Group (DRG) guidelines, Centers for Medicare and Medicaid Services (CMS) National Correct Coding Initiative (NCCI) Policy Manual, CCI table edits and other CMS guidelines.

Claims are subject to the code edit protocols for services/procedures billed. Claim submissions are subject to claim review including but not limited to, any terms of benefit coverage, provider contract language, medical policies, clinical payment and coding policies as well as coding software logic. Upon request, the provider is urged to submit any additional documentation.

Diagnostic Testing of Iron Homeostasis and Metabolism

Policy Number: CPCPLAB008

Version 1.0

Enterprise Medical Policy Committee Approval Date: 1/25/2022

Plan Effective Date: May 1, 2022

Description

BCBSTX has implemented certain lab management reimbursement criteria. Not all requirements apply to each product. Providers are urged to review Plan documents for eligible coverage for services rendered.

Reimbursement Information:

1. Measurement of serum ferritin levels **may be reimbursable** in any of the following situations:

a. In the evaluation of an individual with abnormal hemoglobin and/or hematocrit levels.
b. In the evaluation and monitoring of iron overload disorders.
c. In individuals with symptoms of hemochromatosis (See Note 1).
d. In individuals with first-degree relatives with confirmed hereditary hemochromatosis (HH)
e. In the evaluation of individuals with liver disease.
f. In the evaluation and monitoring of patients with chronic kidney disease who are being considered for, or are receiving treatment for, anemia at a frequency of every 1 to 3 months.
g. In the evaluation of hemophagocytic lymphohistiocytosis (HLH) and Still's Disease.
h. For individuals on iron therapy, at a frequency of every 1 to 3 months.
i. In males with secondary hypogonadism.

2. Serum transferrin saturation (using serum iron and serum iron binding capacity measurements) **may be reimbursable** in the following:
    a. For the evaluation of iron overload in individuals with symptoms of hemochromatosis (See Note 1).
    b. For the evaluation of iron overload in individuals with first-degree relatives with confirmed hereditary hemochromatosis (HH).
    c. For the evaluation of iron deficiency anemia.

3. The use of ferritin or transferrin measurement, including transferrin saturation, as a screening test in asymptomatic patients **is not reimbursable.**

4. Serum hepcidin testing, including immunoassays, **is not reimbursable**.

5. The use of GlycA testing to measure or monitor transferrin or other glycosylated proteins **is not reimbursable**.

Please note that carbohydrate-deficient transferrin is out of the scope for this policy.

NOTE 1: Symptoms of hemochromatosis, according to the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) of the National Institutes of Health include the following (NIDDK, 2014):

- Joint pain
- Fatigue
- Unexplained weight loss
- Abnormal bronze or gray skin color
- Abdominal pain
- Loss of sex drive

Procedure Codes

Code
82728, 83540, 83550, 84466, 84999, 0024U, 0251U

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Policy Update History:

5/1/2022	New policy