

Policy Update

Quantitative or Semiquantitative Allergen Specific IgE Testing

Draft Policy

Coverage for CPT-4 code 86003 (allergen specific IgE; quantitative or semiquantitative, each allergen) must include documentation in the patient's medical record with one of the following numbered criteria:

1. The patient has asthma or rhinitis, and the test is needed to determine the potential sensitivity to inhalant allergens, which may be clinically relevant.^{1,4,14,16}
2. The patient is undergoing testing to identify a specific cause of urticaria or anaphylaxis, which includes at least one of the following^{2,3,5,11,12,13}:
 - a. Venom testing for insect sting reactions as a complementary test for skin testing (i.e. for patients with an anaphylactic reaction to a sting but a negative skin test).
 - b. Medication or vaccine
 - c. Food
 - d. Latex
3. The patient is undergoing an evaluation for allergic bronchopulmonary aspergillosis (ABPA) or allergic fungal rhinosinusitis (AFRS).^{4, 16}
4. The patient is undergoing an evaluation for food allergy.⁵
5. The patient is undergoing an evaluation for atopic dermatitis⁶.
6. The patient is undergoing an environmental assessment for exposure to dust mites, cockroaches, molds, cat, dog, or rodents.^{1,7,8,9,10}
7. As a complementary test for skin testing when confirmation of skin test results is required or when skin test extracts are not available.^{12,15}
8. For a patient who cannot undergo skin testing due to one of the following conditions^{13,14,15} :
 - a. Widespread skin disease
 - b. Patient is receiving skin test suppressive therapy
 - c. Uncooperative patients
 - d. When the history suggests an unusually greater risk of anaphylaxis from skin testing

Allergy testing should be based on the patient's medical history and epidemiologic factors related to the allergens. Testing to large panels of allergens without consideration of the patient's history is not helpful and should be avoided.^{1, 5, 6} Services billed with CPT 86003 will be covered for 50 units per patient, annually. Services exceeding this frequency will require a Treatment Authorization Request (TAR).

For auditing purposes, providers must document medical necessity in the patient's medical record. Claims billed with CPT code 86003 that do not have supporting medical documentation, may result in recoupment.

Reference

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