



PAYMENT INTEGRITY COMPLIANCE Biomarker Testing for Autoimmune Rheumatic Disease

POLICY INFORMATION			
Policy Number:	POL-PP-262 AHS – G2022 – Biomarker Testing for Autoimmune Rheumatic Disease	Original Effective Date:	7/1/2025
Version Number:	001	Revision Date:	
Policy Status:	Active	Next Revision Date:	7/1/2026

NOTICE

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Blue KC reserves the right to review and revise these policies when necessary. When there is an update, we will publish the most current policy to: <https://providers.bluekc.com/ContactUs/PaymentPolicies>.

PROVIDER/ENTITY IMPACTED					
<input checked="" type="checkbox"/> PROFESSIONAL	<input checked="" type="checkbox"/> FACILITY	<input type="checkbox"/> DME	<input type="checkbox"/> AMBULATORY SURGERY	<input checked="" type="checkbox"/> LAB	<input checked="" type="checkbox"/> OTHER

LINES OF BUSINESS IMPACTED						
<input checked="" type="checkbox"/> COMMERCIAL	<input checked="" type="checkbox"/> BLUE MEDICARE ADVANTAGE	<input checked="" type="checkbox"/> ACA QHP¹	<input checked="" type="checkbox"/> SMALL GROUP ACA	<input checked="" type="checkbox"/> JAA²	<input checked="" type="checkbox"/> FEP³	<input type="checkbox"/> DENTAL

¹ ACA QHP: Affordable Care Act Qualified Health Plan for Individual/Family ² JAA: Joint Administrative Account ³ FEP: Federal Employee Program

Disclaimer

Blue KC has developed Provider Payment Policies to provide guidance on payment methodologies as they pertain to submitted claims. These policies are written following industry standard recommendations from sources such as:

- Current Procedural Terminology
- Centers for Medicare and Medicaid
- American Medical Association
- National Correct Coding Initiative
- Other professional organizations and societies

Coverage of any service is determined by date of service, a member's eligibility and benefit limits for the service or services rendered, all terms of the Provider Service Agreement, and other standards of coding rules and guidelines.

Final payment is subject to the application of claims adjudication and edits common to the industry.

For confirmation of which services may be eligible for coverage and description of when medical services are considered medically necessary, not medically necessary, or investigational, please contact:

- Blue KC Provider Hotline for Commercial lines of Business 816-395-3929
- Affordable Care Act Provider Hotline 866-859-3822
- Blue Medicare Advantage Provider Hotline 866-508-7140

In the event of a conflict between any policies, the Member's coverage document will govern.



Description/Application

Systemic autoimmune rheumatic diseases (SARDs) are a diverse group of conditions that primarily affect the joints, bones, muscle, and connective tissue (AAFP, 2019). SARDs are characterized by dysregulated immunity and inflammatory responses, resulting in damage and destruction to joints, connective tissues, skin, blood elements, and other target organs; however, considerable diversity in clinical presentation, disease course, and treatment response exists (Guthridge et al., 2022).

The diagnostic workup for SARDs may involve the antinuclear antibody (ANA) assay, which is used to detect autoantibodies (AAB) against intracellular antigens, originally known as antinuclear antibodies (Tan, 1989). Commonly used as part of the initial diagnostic workup to screen for evidence of systemic autoimmunity (Sato et al., 2014), detection and identification of AABs are important in the diagnosis of SARDs, such as systemic lupus erythematosus (SLE), Sjögren's syndrome (SjS), mixed connective tissue disease (MCTD), systemic sclerosis (SSc), and idiopathic inflammatory myopathies (IIMs) (Tebo, 2017). Extractable nuclear antigens or ENAs (a historical term from when the antigens were extracted from the cell into saline solution prior to testing) include Sm, U1 ribonucleoprotein (RNP), Ro, and La antigens, and are also useful for evaluating individuals with suspected connective tissue disease (Bloch, 2022).

Policy

Application of coverage criteria is dependent upon an individual's benefit coverage at the time of the request

For individuals with a clinical suspicion or autoimmune disease, testing for antinuclear antibodies/ANA may be reimbursable:

- Once per lifetime in individuals with stable symptoms.
- Repeat testing only if a significant change in symptoms occurs.

For individuals with an abnormal, raised ANA titer or with abnormal immunological findings in the serum and a clinical correlation with the appropriate autoimmune disorder, extractable nuclear antigens/ENA panel testing of specific autoantibodies **may be reimbursable**.

For individuals with painful and swollen joints and a clinical suspicion of rheumatoid arthritis, testing for rheumatoid factor/RF and/or anti-cyclic citrullinated peptide/antiCCP antibodies **may be reimbursable**:

- Once per lifetime in individuals with stable symptoms.
- Repeat testing only if a significant change in symptoms occurs.

For individuals with an initial positive ANA test and a diagnosis of systemic autoimmune rheumatic disease, testing of dsDNA up to four times per year **may be reimbursable**.

For individuals with a negative or low positive ANA test, the following condition specific antibody testing **may be reimbursable**:

- Testing for anti-Jo-1 in a unique clinical subset of myositis.
- Testing for anti-SSA in the setting of lupus or Sjögren's syndrome.

Monitoring of disease with ANA testing or ANA titers is **may not be reimbursable**.



PAYMENT INTEGRITY COMPLIANCE Biomarker Testing for Autoimmune Rheumatic Disease

For individuals without symptoms suggestive of an autoimmune disorder, ANA and/or ENA testing **may not be reimbursable**.

For all other situations not described above, testing of specific antibodies in the absence of a positive ANA test **may not be reimbursable**.

For asymptomatic individuals, testing of ANA and/or ENA during a wellness visit or a general exam without abnormal findings **may not be reimbursable**.

For the management of rheumatoid arthritis/RA serum biomarker panel testing (e.g., Vectra DA score, PrismRA) **may not be reimbursable**.

For the diagnosis of systemic lupus erythematosus/SLE the use of cell-bound complement activation products (e.g., AVISE Lupus) **may not be reimbursable**.

For the diagnosis, prognosis, or monitoring of SLE or connective tissue diseases, serum biomarker panel testing with proprietary algorithms and/or index scores (e.g., AVISE CTD, AVISE SLE Monitor, AVISE SLE prognostic) **may not be reimbursable**.

Coding

The following is not an all-encompassing code list. The inclusion of a code does not guarantee it is a covered service or eligible for reimbursement

Code	Description
81490	Autoimmune (rheumatoid arthritis), analysis of 12 biomarkers using immunoassays, utilizing serum, prognostic algorithm reported as a disease activity score
81599	Unlisted multianalyte assay with algorithmic analysis
86038	Antinuclear antibodies (ANA);
86039	Antinuclear antibodies (ANA); titer
86200	Cyclic citrullinated peptide (CCP), antibody
86225	Deoxyribonucleic acid (DNA) antibody; native or double stranded
86235	Extractable nuclear antigen, antibody to, any method (e.g., nRNP, SS-A, SS-B, Sm, RNP, Scl70, J01), each antibody
86430	Rheumatoid factor; qualitative
86431	Rheumatoid factor; quantitative
0039U	Deoxyribonucleic acid (DNA) antibody, double stranded, high avidity
0062U	Autoimmune (systemic lupus erythematosus), IgG and IgM analysis of 80 biomarkers, utilizing serum, algorithm reported with a risk score
0312U	Autoimmune diseases (e.g., systemic lupus erythematosus [SLE]), analysis of 8 IgG autoantibodies and 2 cell-bound complement activation products using enzyme-linked immunosorbent immunoassay (ELISA), flow cytometry and indirect immunofluorescence, serum, or plasma and whole blood, individual components reported along with an algorithmic SLE-likelihood assessment
0521U	Rheumatoid factor IgA and IgM, cyclic citrullinated peptide (CCP) antibodies, and scavenger receptor A (SR-A) by immunoassay, blood



***PAYMENT INTEGRITY COMPLIANCE
Biomarker Testing for Autoimmune
Rheumatic Disease***

Related Documents

Policy Number	Policy Title
AHS-G2155	General Inflammation Testing

References and Resources

Avalon Medical Policy AHS – G2022 – Biomarker Testing for Autoimmune Rheumatic Disease
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Revision History

Version	Date	Summary of Revisions
001	06/01/2025	Initial version