

	<b><i>In Vitro Chemoresistance and Chemosensitivity Assays</i></b>	
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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"/> <b>PROFESSIONAL</b>	<input checked="" type="checkbox"/> <b>FACILITY</b>	<input type="checkbox"/> <b>DME</b>	<input type="checkbox"/> <b>AMBULATORY SURGERY</b>	<input checked="" type="checkbox"/> <b>LAB</b>	<input type="checkbox"/> <b>OTHER</b>

LINES OF BUSINESS IMPACTED						
<input checked="" type="checkbox"/> <b>COMMERCIAL</b>	<input checked="" type="checkbox"/> <b>BLUE MEDICARE ADVANTAGE</b>	<input checked="" type="checkbox"/> <b>ACA QHP<sup>1</sup></b>	<input checked="" type="checkbox"/> <b>SMALL GROUP ACA</b>	<input checked="" type="checkbox"/> <b>JAA<sup>2</sup></b>	<input checked="" type="checkbox"/> <b>FEP<sup>3</sup></b>	<input type="checkbox"/> <b>DENTAL</b>

<sup>1</sup> ACA QHP: Affordable Care Act Qualified Health Plan for Individual/Family    <sup>2</sup> JAA: Joint Administrative Account    <sup>3</sup> 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**

In vitro chemotherapy sensitivity and resistance assays refer to any in vitro laboratory analysis that is performed specifically to evaluate whether tumor growth is inhibited by a known chemotherapy drug or, more commonly, a panel of drugs.

**Policy**

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

*The following does not meet coverage criteria due to a lack of available published scientific literature confirming that the test(s) is/are required and beneficial for the diagnosis and treatment of an individual’s illness.*

In vitro chemosensitivity assays (e.g., histoculture drug response assay, fluorescent cytoprint assay) **may not be reimbursed.**

In vitro chemoresistance assays (e.g., extreme drug resistance [EDR] assays) **may not be reimbursed.**

**Coding**

<b>CPT</b>	<b>Code Description</b>
81535	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score, first single drug, or drug combination. Proprietary test: ChemoFX® Lab/manufacturer: Helomics, Corp
81536	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; each additional single drug or drug combination (List separately in addition to code for primary procedure) Proprietary test: ChemoFX® Lab/manufacturer: Helomics, Corp
86849	Unlisted immunology procedure
88104	Cytopathology, fluids, washings, or brushings, except cervical or vaginal; smears with interpretation
88199	Unlisted cytopathology procedure
88305	Level IV - Surgical pathology, gross and microscopic examination
88313	Special stain including interpretation and report; Group II, all other (e.g., iron, trichrome), except stain for microorganisms, stains for enzyme constituents, or immunocytochemistry and immunohistochemistry
88358	Morphometric analysis; tumor (e.g., DNA ploidy)
89050	Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood;
89240	Unlisted miscellaneous pathology test
0083U	Oncology, response to chemotherapy drugs using motility contrast tomography, fresh or frozen tissue, reported as likelihood of sensitivity or resistance to drugs or drug combinations Proprietary test: Onco4D™

	Lab/manufacturer: Animated Dynamics, Inc.
0248U	Oncology spheroid cell culture in 3D microenvironment, 12 drug panel, brain, or brain metastasis response prediction for each drug Proprietary test: 3D Predict Glioma Lab/Manufacturer: KIYATEC®, Inc
0249U	Oncology (breast), semiquantitative analysis of 32 phosphoproteins and protein analytes, includes laser capture microdissection, with algorithmic analysis and interpretative report Proprietary test: Theralink® Reverse Phase Protein Array (RPPA) Lab/Manufacturer: Theralink® Technologies, Inc
0285U	Oncology, disease progression and response monitoring to radiation, chemotherapy, or other systematic cancer treatments, cell free DNA, quantitative branched chain DNA amplification, plasma, reported in ng/ml a radiation toxicity score Proprietary test: RadTox™ cfDNA test Lab/Manufacturer: DiaCarta Clinical Lab/DiaCarta Inc
0435U	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on cytotoxicity percentage observed, minimum of 14 drugs or drug combinations. Proprietary test: ChemolD® Lab/Manufacturer: ChemolD® Lab, Cordgenics, LLC
0525U	Oncology, spheroid cell culture, 11 drug panel (carboplatin, docetaxel, doxorubicin, etoposide, gemcitabine, niraparib, Olaparib, paclitaxel, rucaparib, topotecan, veliparib) ovarian, fallopian, or peritoneal response prediction for each drug Proprietary test: 3D Predict™ Ovarian Lab/Manufacturer: KIYATEC, Inc, KIYATEC, Inc
0564T	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on percent of cytotoxicity observed, a minimum of 14 drugs or drug combinations (Reported for ChemolD®)

**References and Resources**

Avalon Medical Policy AHS – G2100 – In Vitro Chemoresistance and Chemosensitivity Assays

**Related Documents**

N/A

<b>Revision History</b>		
<b>Version</b>	<b>Date</b>	<b>Summary of Revisions</b>
001	07/01/2025	Initial version
002	10/01/2025	Avalon 4 <sup>th</sup> Quarter updates