

# Premier Health Insuring Corporation

## POLICY AND PROCEDURE MANUAL

Policy Number: MP.027.PC  
Last Review Date: 11/12/2015  
Effective Date: 01/01/2016  
Renewal Date: 01/01/2017

### MP.027.PC - Genetic Testing- Topographic Genotyping

This policy applies to the following line(s) of business:

- ✓ Premier Health Insuring Corporation MA – DSNP

Premier Health Insuring Corporation considers Topographic Genotyping medically necessary for the following indications:

TG testing is covered when both of following indications are met:

1. Cystic lesions and masses of the pancreas when cytology is suspicious for cancer
2. Documentation of specific reasons for the additional testing, including how results will change patient management of their disease

#### Limitations

1. TG testing (PathfinderTC®) is not intended for “first-line” pathology analysis
2. RedPath® Diagnostics (PathfinderTG®) for Topographic Genotyping will be considered an out-of-network provider

#### Background

Topographic Genotyping (TG) is a cancer diagnostic testing mechanism combining pathologic study with molecular analyses of microdissected tissue. TG is claimed to enhance the ability to provide more specific diagnostic information and ultimately help guide cancer treatment decisions. The Centers for Medicare and Medicaid (CMS) describes this type of diagnostic method as an alternative to standard pathologic analyses which can provide inconclusive information at times. Loss-of-heterozygosity based topographic genotyping and other molecular analyses are combined in a patented technology known as PathfinderTG®. This testing is approved by Clinical Laboratory Improvement Amendments (CLIA) & the College of American Pathologists (CAP).

#### Codes:

CPT Codes / HCPCS Codes / ICD-10 Codes	
Code	Description
81479	Unlisted molecular pathology procedure
84999	Unlisted chemistry procedure

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### Variations

Topographical Genotyping is considered Experimental and Investigational for all products except Medicare.

### References

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### Disclaimer:

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Premier Health Insuring Corporation reserves the right to review and update the medical payment and prior authorization guidelines in its sole discretion. Notice of such changes, if necessary, shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.

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