

Subject: Multi-biomarker (Vectra™ DA) test for Rheumatoid Arthritis

Medical Policy #: 42.0

Status: New Policy

Original Effective Date: 09/23/2020

Last Review Date: 07/26/2023

Disclaimer

Refer to the member's specific benefit plan and Schedule of Benefits to determine coverage. This may not be a benefit on all plans or the plan may have broader or more limited benefits than those listed in this Medical Policy.

Description

The Vectra DA test (Crescendo Bioscience) is a multi-biomarker disease activity (MBDA) blood test that evaluates 12 protein biomarkers (known to be important in rheumatoid arthritis) to construct a disease activity score ranging from 0 to 100.

Coverage Determination

Prior Authorization is required. Logon to Pres Online to submit a request: <https://ds.phs.org/preslogin/index.jsp>

This test is considered investigational for Commercial and Medicaid.

The use of a multi-biomarker disease activity (MBDA) scores, (e.g. Vectra™ DA) test is **covered for Medicare only**.

Presbyterian Health Plan follows Novitas LCA ([A56541](#)) Billing and Coding: Biomarkers Overview and LCD ([L35062](#)) Biomarkers Overview

- Multi-biomarker disease activity blood test for Autoimmune (rheumatoid arthritis), is limited to two services per rolling year.
- **The test is not used to validate a diagnose of RA or guide therapy selections to a specific drug.**

Medicare determines the Vectra DA test is reasonable and necessary for use as a clinical validity and clinical utility. Its intended use is to aid the assessment of disease activity measurements for rheumatoid arthritis (RA), to help manage decisions in routine clinical care for patients who have confirmed diagnosis of RA.

Coding

The coding listed in this medical policy is for reference only. Covered and non-covered codes are within this list.

Current Procedural Terminology (CPT) Codes

CPT Codes	Description (Prior Authorization is required)
81490	Autoimmune (rheumatoid arthritis), analysis of 12 biomarkers using immunoassays, utilizing serum, prognostic algorithm reported as a disease activity score

ICD-10 Diagnosis Codes

ICD10 code range	Description
	Access Billing and Coding: Biomarkers Overview (A56541), for entire listing of ICD-10 codes that support medical necessity.

Reviewed by / Approval Signatures

Clinical Quality & Utilization Mgmt. Committee: [Gray Clarke MD](#)

Senior Medical Director: [David Yu MD](#)

Medical Director: [Ana Maria Rael MD](#)

Date Approved: 07/26/2023

References

1. CMS, Wisconsin Physicians Service Ins. Co, Local Coverage Determination, MoIDX: Molecular Diagnostic Tests (MDT)(L36807), Revision History Date: 04/27/2023, Rev.#R15. [Cited 05/22/2022]
2. CMS, Wisconsin Physicians Service Ins. Co, Local Coverage Article, Billing and Coding: MoIDX: Molecular Diagnostic Tests MoIDX: Vectra™ DA (A55223), Revision History Date: 02/24/2022, Rev.#R5, Retired [Cited 05/22/2023]
3. CMS, Novitas Solutions, Inc, Local Coverage Determination (LCD): Biomarkers Overview (L35062) Revision History Date: 12/12/2021, R#22, [Cited 05/22/2023]
4. CMS, Novitas (A56541) Billing and Coding: Biomarkers Overview, Revision date: 08/03/2022- R5. [Cited 05/22/2023]
5. Hayes, Vectra DA Test (Crescendo Bioscience Inc.) for Management of Patients with Rheumatoid Arthritis, Published, January 25, 2018, annual review: Mar 14, 2022, ARCHIVED: Feb 25, 2023[Cited 05-22-2023]
6. Aetna, Rheumatic Diseases: Selected Tests, Number 0866, last review date: 12/07/2022, Next review: 10/12/2023 ARCHIVED: Feb 25, 2023 [Cited 05/22/2023]
7. Humana, Rheumatoid Arthritis: Biologic Markers and Pharmacologic Assessment, Policy Number: HUM-0487-018Revision Date: 07/27/2022 [Cited 05/22/2023]
8. Regence, BCBS, Medical policy Manual, Multi-biomarker Disease Activity Blood Test for Rheumatoid Arthritis, Policy No. 67, Last review date: August 2022, Next review date: June 2023.

Publication History

- | | |
|------------|--|
| 09-23-2020 | New Policy: Coverage is for Medicare only. CPT code 81490 will require prior authorization. Its intended use is to aid the assessment of disease activity measurements for rheumatoid arthritis (RA), to help manage decisions in routine clinical care for patients who have confirmed diagnosis of RA. |
| 07-28-2021 | Annual review. Reviewed 07/19/2021. No change. Still covered only for Medicare and still following L36807/A55223. Non-Medicare is still considered investigational. Continue PA for 81490. |
| 07-27-2022 | Annual review. Reviewed by PHP Medical Policy Committee on 06/03/2022. Continue to follow the retired LCA A55223 regarding the limit of test to be two services per rolling 12 months. Continue non-coverage for commercial and Centennial since Vectra DA test is considered experimental and at this time only supported by Medicare. Continue PA requirement for 81490. |
| 07-26-2023 | Annual review. Reviewed by PHP Medical Policy Committee on 05/24/2023. Updated Medicare Local Coverage Determination: Removed the retired Wisconsin LCA A55223 and LCD L36807 and replaced with Novitas LCA A56541/LCD L35062. Continue coverage for Medicare only. Continue as investigation for Commercial and Medicaid. Continue PA requirement for 81490. Configure code 81490 as experimental for commercial and Medicaid |

This Medical Policy is intended to represent clinical guidelines describing medical appropriateness and is developed to assist Presbyterian Health Plan and Presbyterian Insurance Company, Inc. (Presbyterian) Health Services staff and Presbyterian medical directors in determination of coverage. The Medical Policy is not a treatment guide and should not be used as such.

For those instances where a member does not meet the criteria described in these guidelines, additional information supporting medical necessity is welcome and may be utilized by the medical director in reviewing the case. Please note that all Presbyterian Medical Policies are available online at: [Click here for Medical Policies](#)

Web links:

At any time during your visit to this policy and find the source material web links has been updated, retired or superseded, PHP is not responsible for the continued viability of websites listed in this policy.

When PHP follows a particular guideline such as LCDs, NCDs, MCG, NCCN etc., for the purposes of determining coverage; it is expected providers maintain or have access to appropriate documentation when requested to support coverage. See the References section to view the source materials used to develop this resource document.