



Indiana Medicare Non-Coverage Update: ABN Now Required for Genetic Testing for Thrombophilia

TESTS AFFECTED:

PCL SOFT CODE	TEST NAME	CPT CODES
FACV	Factor V Leiden (DNA)	81241
FACII	Factor II Mutation, DNA (Prothrombin) 20210	81240
MTHRM	MTHFR (Methylenetetrahydrofolate) 2 Mutations	81291

Indiana's Medicare Contractor has issued a Local Coverage Determination (L36400) non-coverage policy for genetic testing for thrombophilia.

This LCD includes genetic testing for all risk factors, signs, symptoms, diseases, or conditions, including cardiovascular risk.

EXCEPTION: PREGNANT WOMEN

FACV and FACII mutations are indicated for pregnant patients who have a history of personal VTE associated with a non-recurrent risk factor who are not receiving anticoagulant prophylaxis.

This notice only applies to genetic (DNA) testing. Functional and antigenic testing is still covered and includes the following:

ALTERNATIVE TESTING OPTIONS	
Protein C	C-reactive protein
Protein S	Fibrinogen
Activated Protein C Resistance	Homocysteine levels
Factor VIII	Glycoprotein antibodies
Anti-phospholipid antibody (lupus anticoagulant)	