Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:
Allergy Testing and Treatment

Applies to:

Commercial Products

☒ Harvard Pilgrim Health Care Commercial products
☒ Tufts Health Plan Commercial products

Public Plans Products

☒ Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
☒ Tufts Health Together – MassHealth Accountable Care Partnership Plans
☒ Tufts Health RITogether – A Rhode Island Medicaid Plan
☒ Tufts Health One Care – A dual-eligible product

Senior Products

☒ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
☒ Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy

Point32Health reimburses contracted providers for medically necessary allergy testing and treatment services.

Prerequisites

Applicable Point32Health referral, notification, and authorization policies may apply. Refer to the appropriate sections within the Provider Manuals for more information.

General Benefit Information

Services are pursuant to the member's benefit plan documents and are subject to applicable member out-of-pocket cost (e.g., copayment, coinsurance, deductible). Member eligibility and benefit specifics should be verified prior to initiating services.

Use of non-contracted labs may have the unintended consequence of subjecting the member to unnecessary services not ordered by the treating provider or other unreasonable financial exposure. In such circumstances, Point32Health may hold the ordering provider accountable for any inappropriate behavior on the part of the nonparticipating lab that has been selected.

Point32Health Reimburses

Allergy Testing

- In vivo testing, including skin allergy testing, bronchial provocation tests, and food challenges
- In vitro testing to identify the presence of allergen-specific immunoglobulin E (IgE) in the blood serum

Allergy Treatment (Immunotherapy)

- Antigens, extracts, and venoms used in allergy treatment
- Enteral nutrition in accordance with applicable medical necessity guidelines (see Related Policies and Resources)
- Preparation and/or provision of the allergy immunotherapy injection(s)

Point32Health Does *Not* Reimburse

- Air conditioners, bed supplies, air filters, and other products or supplies for environmental allergies
- Allergy tests or immunotherapy that have no proven health benefit
- Allergy testing that is considered experimental or is not FDA approved
- Diet therapy for allergies

- Duplicate services, including allergy testing for percutaneous scratch tests, intradermal tests and patch tests to a facility
- Homeopathy for allergies
- Sublingual immunotherapy

Provider Billing Guidelines and Documentation

Providers are reimbursed according to the applicable contracted rates and fee schedules.

Coding

Code	Description
95004-95079	Allergy testing: Bill with a count representing the number of tests performed
95115-95134	Allergy Immunotherapy
95144-95170	Antigen preparation: Bill with the specific number of doses prepared
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens

Multi-Dose Billing

When preparing a multi-dose vial of antigens for a patient for whom only one dose is injected, bill the entire number of doses in the vial and the appropriate injection service with a count of one. For the remaining doses, bill only the appropriate injection service. This applies even if someone else in the office injects the preparations or the injections take place outside the office.

Tufts Health Plan Products

The following limitations apply:

- 30 units of 86003 within 365 days

Tufts Health Public Plans and Senior Products

- 200 allergy tests (any combination of percutaneous and intradermal) within 365 days. Daily maximums may apply.

Tufts Health Commercial and Tufts Health Direct

- One unit of allergy testing per day when billed by a facility

Related Policies and Resources

Payment Policies

- Evaluation and Management
- Maximum Units

Clinical Policies

- Allergy Testing and Immunotherapy (Commercial)
- Enteral Nutrition, Digestive Enzyme Cartridges and Special Medical Formulas (Together and One Care)
- Enteral Nutrition Products and Digestive Enzyme Cartridges (Direct and RITogether)
- Oral Formula and Enteral Nutrition (Commercial and Direct)

Publication History

06/01/2026: Annual review; administrative updates
01/01/2026: Corrected description of CPT code 95165
05/30/2025: Policy moved to new template; includes all lines of business

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on

the date of service, coordination of benefits, referral/authorization, and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.