Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:

Laboratory: Colorectal Cancer Screening

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

Colorectal cancer (CRC) is the term used to describe the development of cancer in the colon or the rectum. Colon cancer and rectal cancer are often grouped together because the two diseases share similar characteristics and features.

Screening is key in detecting colorectal cancer early and has a major impact on colorectal cancer incidence and mortality rates. Screening for colorectal cancer occurs through a preventive visit with a healthcare provider who provides an individual risk assessment.

Indications and/or Limitations of Coverage

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

1. For asymptomatic individuals 45 to 75 years of age, annual screening for colorectal cancer with a fecal immunochemical test (FIT) (preferred) or a guaiac fecal occult blood test (gFOBT) **MEETS COVERAGE CRITERIA**.
2. The use of FIT-DNA (Cologuard™, Cologuard Plus™) for colorectal cancer screening **MEETS COVERAGE CRITERIA** in individuals 45-75 years of age once every three years.
3. For average risk, asymptomatic individuals over 75 years of age, colorectal cancer screening **DOES NOT MEET COVERAGE CRITERIA**.
4. The use of methylated Septin 9 (ColoVantage) for colorectal cancer screening DOES NOT MEET COVERAGE CRITERIA.

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 a patient's illness.

5. Colorectal cancer screening using any of the following techniques **DOES NOT MEET COVERAGE CRITERIA**:
   a. Screening for anal cytological abnormalities (anal pap smear).
   b. Screening for anal HPV infection.
   c. Screening using cell-free DNA techniques (e.g., Guardant Shield™).

Applicable CPT/HCPCS Procedure Codes

Procedure codes appearing in policy documents are included only as a general reference tool for each policy. They may not be all-inclusive.

Coding

Code	Description
81327	SEPT9 (Septin9) (e.g., colorectal cancer) promoter methylation analysis
81528	Oncology (colorectal) screening, quantitative real-time target, and signal amplification of 10 DNA markers (KRAS mutations, promoter methylation of NDRG4 and BMP3) and fecal hemoglobin, utilizing stool, algorithm reported as a positive or negative result
82270	Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening (i.e., patient was provided 3 cards or single triple card for consecutive collection)
82274	Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative, feces, 1-3 simultaneous determinations
87624	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), high-risk types (e.g., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) pooled result
87625	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), types 16 and 18 only, includes type 45, if performed
87626	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), high-risk types (e.g., 16, 18, 31, 45, 51, 52), and high-risk pooled result (Effective for DOS beginning 9/1/2026)
88112	Cytopathology, selective cellular enhancement technique with interpretation (e.g., liquid-based slide preparation method), except cervical or vaginal
0421U	Oncology (colorectal) screening, quantitative real-time target and signal amplification of 8 RNA markers (GAPDH, SMAD4, ACY1, AREG, CDH1, KRAS, TNFRSF10B, EGLN2) and fecal hemoglobin, algorithm reported as a positive or negative for colorectal cancer risk. (Effective for DOS beginning 12/1/2026) Proprietary Test: Colosense™ Lab/Manufacturer: Geneoscopy, Inc.
0464U	Oncology (colorectal) screening, quantitative real-time target and signal amplification, methylated DNA markers, including LASS4, LRRC4 and PPP2R5C, a reference marker ZDHHC1, and a protein marker (fecal hemoglobin), utilizing stool, algorithm reported as a positive or negative result Proprietary Test: Cologuard Plus™ Lab/Manufacturer: Exact Sciences Laboratories, LLC
0537U	Oncology (colorectal cancer), analysis of cell-free DNA for epigenomic patterns, next-generation sequencing, >2500 differentially methylated regions (DMRs), plasma, algorithm reported as positive or negative Proprietary Test: Shield™ Lab/Manufacturer: Guardant Health, Inc.

Evidence-based Scientific References

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Publication History

12/01/2026:	Administrative edits; added code 0421U, effective for DOS beginning Dec. 1, 2026
07/01/2026:	Annual policy review; administrative edits; added CPT code 87626, effective for DOS beginning Sept. 1, 2026; removed deleted code 0500T
09/01/2025:	Policy created to support coverage guidelines, effective for dates of service beginning Nov. 1, 2025

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.