Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:

Laboratory: *Helicobacter pylori* Testing

Effective date: Nov. 1, 2025

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

Helicobacter pylori (H. pylori) is a spiral-shaped, gram-negative bacteria that thrives while living in acidic environments, growing in close association with the stomach lining. *H. pylori* infection causes chronic inflammation (infection) in the stomach and is associated with conditions such as peptic ulcer disease, chronic gastritis, gastric adenocarcinoma, and gastric mucosa associated lymphoid tissue (MALT) lymphoma.

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 individuals who are 18 years of age and older, urea breath testing or stool antigen testing to diagnose an *H. pylori* infection **MEETS COVERAGE CRITERIA** in any of the following situations:
   a. For individuals with dyspepsia (see Note 1).
   b. For individuals with active peptic ulcer disease (PUD).
   c. For individuals with past PUD and who have had recurrent symptoms.
   d. For individuals with low-grade gastric mucosa-associated lymphoid tissue (MALT) lymphoma.
   e. For individuals with a history of resection of early gastric cancer (EGC).
   f. For individuals with gastric intestinal metaplasia (GIM).
   g. For individuals initiating chronic treatment with or who have been on a long-term aspirin or non-steroidal anti-inflammatory drug (NSAID) treatment.
   h. For individuals with unexplained iron deficiency anemia.
   i. For individuals with idiopathic thrombocytopenic purpura (ITP).
   j. For individuals with a family history of gastric cancer.
   k. For individuals who are first-generation immigrants from a high prevalence area.
2. For individuals who are 18 years of age and older and who are undergoing endoscopic examination or who have alarm symptoms (see Note 2), a biopsy-based endoscopic histology test and either a rapid urease test or a culture with susceptibility testing to diagnose an *H. pylori* infection **MEETS COVERAGE CRITERIA**.
3. For individuals who are less than 18 years of age, urea breath testing or stool antigen testing to diagnose an *H. pylori* infection **MEETS COVERAGE CRITERIA** in any of the following situations:
   a. For individuals who have gastric or duodenal ulcers or erosions.
   b. For individuals who have a family history of gastric cancer.

4. For individuals who are less than 18 years of age and who have refractory iron deficiency anemia, a biopsy-based endoscopic histology test and either a rapid urease test or a culture with susceptibility testing to diagnose an *H. pylori* infection **MEETS COVERAGE CRITERIA**.
5. For all individuals who have tested positive for *H. pylori*, urea breath testing or stool antigen testing to measure the success of eradication of *H. pylori* infection, with testing performed at least four weeks post-treatment, **MEETS COVERAGE CRITERIA**.
6. For individuals with a refractory *H. pylori* infection, susceptibility testing (culture or nucleic acid based) **MEETS COVERAGE CRITERIA**.
7. Urea breath testing or stool antigen testing to diagnose an *H. pylori* infection **DOES NOT MEET COVERAGE CRITERIA** for any of the following situations:
   a. For asymptomatic individuals of all ages.
   b. For individuals 18 years and older with typical symptoms of gastroesophageal reflux disease (i.e., heartburn, regurgitation) who do not have a history of peptic ulcer disease (PUD).
8. For individuals of all ages, serologic testing for *H. pylori* infection **DOES NOT MEET COVERAGE CRITERIA**.
9. For individuals less than 18 years of age, a biopsy-based endoscopic histology test and a rapid urease test or a culture with susceptibility testing to diagnose an *H. pylori* infection **DOES NOT MEET COVERAGE CRITERIA** in any of the following situations:
   a. For children with functional abdominal pain.
   b. As part of an initial investigation in children with iron deficiency anemia.
   c. When investigating causes of short stature.
10. For individuals with recent use of antibiotics, proton pump inhibitors (PPIs), or bismuth, the urea breath test, stool antigen, or biopsy-based testing to diagnose an *H. pylori* infection **DOES NOT MEET COVERAGE CRITERIA**.
11. To diagnose an *H. pylori* infection, concurrent testing with any combination of the urea breath test, stool antigen testing, and/or biopsy-based testing **DOES NOT MEET COVERAGE CRITERIA**.
12. For all other situations not described above, nucleic acid testing for *H. pylori* **DOES NOT MEET COVERAGE CRITERIA**.

NOTES:
Note 1: "Dyspepsia refers to bothersome upper abdominal symptoms that are often meal related. The predominant symptoms are fullness (or bloating) after meals, early satiety (inability to finish a normal-sized meal because of postprandial discomfort), or epigastric pain (or burning) that may or may not be related to meals. If dyspepsia is chronic, epigastric pain is a less common feature than postprandial fullness or satiety. Pain is not required to make a diagnosis of dyspepsia."[2]

Note 2: Alarm features of dyspepsia: vomiting, gastrointestinal bleeding, unexplained iron deficiency, or weight loss.[3]

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
83009	Helicobacter pylori, blood test analysis for urease activity, non-radioactive isotope (e.g., C-13)
83013	Helicobacter pylori; breath test analysis for urease activity, non-radioactive isotope (e.g., C-13)
83014	Helicobacter pylori; drug administration
86318	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step-method (e.g., reagent strip);
86677	Antibody; Helicobacter pylori
87070	Culture, bacterial; any other source except urine, blood or stool, aerobic, with isolation and presumptive identification of isolates
87077	Culture, bacterial; aerobic isolate, additional methods required for definitive identification, each isolate
87081	Culture, presumptive, pathogenic organisms, screening only;
87149	Culture, typing; identification by nucleic acid (DNA or RNA) probe, direct probe technique, per culture or isolate, each organism probed
87150	Culture, typing; identification by nucleic acid (DNA or RNA) probe, amplified probe technique, per culture or isolate, each organism probed

Code	Description
87153	Culture, typing; identification by nucleic acid sequencing method, each isolate (e.g., sequencing of the 16S rRNA gene)
87181	Susceptibility studies, antimicrobial agent; agar dilution method, per agent (e.g., antibiotic gradient strip)
87186	Susceptibility studies, antimicrobial agent; microdilution or agar dilution (minimum inhibitory concentration [MIC] or breakpoint), each multi-antimicrobial, per plate
87205	Smear, primary source with interpretation; Gram or Giemsa stain for bacteria, fungi, or cell types
87338	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; Helicobacter pylori, stool
87339	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; Helicobacter pylori
88305	Level IV - Surgical pathology, gross and microscopic examination - Stomach biopsy

Evidence-based Scientific References

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Publication History

08/01/2026: Annual policy review; administrative edits
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.