Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:

Laboratory: Testing for Alpha-1 Antitrypsin Deficiency

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

Alpha 1-antitrypsin deficiency (AATD) is a genetic disease that causes deficient or defective production of the alpha-1 antitrypsin (AAT) protease inhibitor that can affect the lungs, liver, and (rarely) skin. AAT deficiency results in unbalanced rapid breakdown of proteins, especially in the supporting elastic tissue of the lungs.

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 suspected of having alpha-1 antitrypsin (AAT) deficiency, serum quantification of alpha-1 antitrypsin (AAT) protein and AAT phenotyping or AAT proteotyping (see **Note 1**) **MEETS COVERAGE CRITERIA** once per lifetime in any of the following situations:
   a. For symptomatic individuals 18 years or older with emphysema, COPD, or asthma.
   b. For individuals with unexplained liver disease (e.g., chronic hepatitis with or without cirrhosis, chronically elevated aminotransferase levels, portal hypertension, primary liver cancer).
   c. For individuals with persistent obstruction on pulmonary function tests without identifiable risk factors (e.g., cigarette smoking, occupational exposure).
   d. For individuals 18 years or older with necrotizing panniculitis.
   e. For the siblings of an individual with known alpha-1 antitrypsin (AAT) deficiency.
   f. For individuals with anti-proteinase three-positive vasculitis (C-ANCA [anti-neutrophil cytoplasmic antibody]-positive vasculitis).
   g. For individuals with bronchiectasis without evident etiology.
   h. For individuals with neonatal cholestasis.
2. For individuals who have negative genotype results for common variants or who have discordant results between AAT serum levels and proteotype, but for whom a clinical suspicion of AAT deficiency remains, isoelectric focusing/phenotyping **MEETS 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 an individual's illness.

3. For all other situations not described above, testing for AAT deficiency **DOES NOT MEET COVERAGE CRITERIA**.

NOTES:
Note 1: AAT phenotyping should be performed using isoelectric focusing. AAT proteotyping (Pi-typing or protease inhibitor typing) for Z and S alleles should be performed using liquid chromatography-tandem mass spectrometry.

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
82103	Alpha-1-antitrypsin; total
82104	Alpha-1-antitrypsin; phenotype

Evidence-based Scientific References

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Publication History

11/01/2026:	Administrative edits; removed CPT codes 82542, 83789
03/01/2026:	Annual 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.