

# Tumour Markers Indications

## Adjudication Guideline

**Rule Category:**  
Medical

**Ref: No:**  
2013-MN-0008

**Version Control:**  
Version No.4.1

**Effective Date:**  
08/02/2019

**Revision Date:**  
30/04/2025

**Approved by:**  
Daman

**Responsible:**  
Medical Standards  
& Research

**Related Adjudication  
Guidelines:**  
N/A

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## **1. Abstract**

### **1.1 For Members**

Tumour markers also known as biomarkers are proteins mostly produced by cancer or by other cells of the body in response to cancer or certain benign (non-cancerous) conditions. They are produced at higher levels in cancerous cases. These are found in blood, urine, stool, tumour tissue or other tissues or other bodily fluids. More than 20 tumour markers have been developed for clinical use.

Daman covers tumour markers if medically justified as per the best international medical practice and as per the policy terms and conditions of each Health Insurance Plan administered by Daman.

### **1.2 For Medical Professionals**

The various tumour markers differ in their usefulness for screening, diagnosis, prognosis, assessing therapeutic response, and detecting recurrence.

The main use of tumour markers in clinical medicine is as a supportive laboratory test for diagnosis or in follow up of a patient being treated for malignancy.

Daman covers the tumour markers for cancer management if medically necessary, for all plans administered by Daman as per the policy terms and conditions of each plan.

## **2. Scope**

This guideline emphasises on the indications and coverage of the given tumour markers for all the health insurance plans administered by Daman both as per the policy terms and conditions and as per the international best practice.

## **3. Adjudication Policy**

### **3.1 Eligibility / Coverage Criteria**

Tumour markers are covered as per best clinical practice and as per plan wise coverage criteria for all health insurance plans administered by Daman.

## 3.2 Requirements for Coverage

ICD and CPT codes must be coded to the highest level of specificity

## 3.3 Non-Coverage

- Daman does not cover tumour markers for the Visitor's Plan.
- Daman does not cover any of the services considered to be experimental or unproven for requesting tumour markers.
- Daman does not cover any of the tumour markers which are considered as experimental or unproven.

## 3.4 Payment and Coding Rules

Tumor Markers	CPT Code	Code Description	Clinical Indications
<b>Alpha-fetoprotein (AFP)</b>	82105	Alpha-fetoprotein (AFP); serum	Hepatocellular carcinoma and testicular germ cell tumour.
<b>Anaplastic Lymphoma Kinase (ALK gene)</b>	88121	Cytopathology, in situ hybridization (e.g., FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; using computer-assisted technology	Non-small cell lung cancer (NSCLC) and anaplastic large cell lymphoma
<b>Beta-2-microglobulin (B2M)</b>	82232	Beta-2 microglobulin	Multiple myeloma, chronic lymphocytic leukaemia, and some lymphomas.
<b>Beta-human chorionic gonadotropin (Beta-hCG)</b>	84702	Gonadotropin, chorionic (B-hCG); quantitative	Choriocarcinoma and testicular germ cell tumour
	84703	; qualitative	
	84704	; free beta chain	
<b>BCR-ABL fusion gene (Philadelphia chromosome)</b>	81206	BCR/ABL1 (t (9;22)) (e.g., chronic Myelogenous leukemia) translocation analysis; major breakpoint, qualitative or quantitative	Chronic Myeloid Leukaemia, Acute Lymphoblastic leukaemia, Acute Myelogenous leukaemia.
	81207	; minor breakpoint, qualitative or quantitative	
	81208	; other breakpoint, qualitative or quantitative	

<b>Bladder Tumour Ag (BTA)</b>	86294	Immunoassay for tumor antigen, qualitative or semi quantitative (e.g., bladder tumor antigen)	Bladder cancer, cancer of kidneys and ureters.
<b>C-Kit / CD117</b>	88342	Immunohistochemistry or immunocytochemistry, per specimen; initial single antibody stain procedure	Gastrointestinal stromal tumour, Mucosal melanoma.
<b>CA-15-3 / CA27.29</b>	86300	Immunoassay for tumor antigen, quantitative; CA 15-3 (27.29)	Breast Cancer (Performed for <b>screening*</b> , treatment effectiveness or recurrence)
<b>CA 19-9</b>	86301	Immunoassay for tumor antigen, quantitative; CA 19-9	Pancreatic cancer (Gold standard), gallbladder cancer, bile duct cancer, gastric cancer
<b>CA-125</b>	86304	Immunoassay for tumor antigen, quantitative; CA 125	Ovarian cancer
<b>Calcitonin</b>	82308	Calcitonin	Medullary thyroid cancer
<b>Carcinoembryonic antigen (CEA)</b>	82378	Carcinoembryonic antigen (CEA)	Colorectal cancer
<b>Chromogranin A (CgA)</b>	86316	Immunoassay for tumor antigen, other antigen, quantitative (e.g., CA 50, 72-4, 549), each	Neuroendocrine tumour
<b>Cytokeratin fragment 21-1</b>	86316	Immunoassay for tumor antigen, other antigen, quantitative (e.g., CA 50, 72-4, 549), each	Lung cancer
<b>Epidermal growth factor receptor (EGFR)</b>	81235	Cytopathology, in situ hybridization (e.g., FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; using computer-assisted technology	Non-small cell lung cancer (NSCLC)
<b>Oestrogen receptor (ER)/progesterone receptor (PR)</b>	88360, 88361	Morphometric analysis, tumor immunohistochemistry (e.g., Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semi quantitative, per specimen,	Breast cancer

		each single antibody stain procedure; manual ; using computer-assisted technology	
<b>Fibrin/fibrinogen</b>	85362 / 85366/ 85370/ 85378/ 85379/ 85380	<b>Fibrin (ogen) degradation (split)</b> products (FDP) (FSP); agglutination slide, semi quantitative. ; par coagulation ; quantitative. <b>Fibrin degradation products, D-dimer</b> ; qualitative or semi quantitative. ; quantitative. ; ultrasensitive (e.g., for evaluation for venous thromboembolism), qualitative or semi quantitative.	Bladder cancer
<b>Human Epididymis Protein 4 (HE4)</b>	86305	Human epididymis protein 4 (HE4)	Ovarian cancer
<b>human epidermal growth factor receptor (HER2/neu)</b>	83950	Oncoprotein; HER-2/neu	Breast cancer, gastric cancer, and gastro esophageal junction adenocarcinoma.
<b>Immunoglobulins</b>	82784	Gammaglobulin (immunoglobulin); IgA, IgD, IgG, IgM, each	Multiple myeloma and Waldenström macroglobulinemia
<b>Lactate dehydrogenase (LDH)</b>	83615 / 83625	Lactate dehydrogenase (LD), (LDH). (LD), (LDH); isoenzymes, separation, and quantitation.	Testicular germ cell tumors, lymphoma, leukemia, melanoma, and neuroblastoma
<b>Myeloperoxidase (MPO)</b>	83876	Myeloperoxidase (MPO)	Acute Myeloid Leukemia
<b>Prostate-specific antigen (PSA)</b>	84152, 84153, 84154	Prostate specific antigen (PSA); complexed (direct measurement) (PSA); total (PSA); free	Prostate cancer (Performed for <b>screening**</b> , diagnosis, assess response to treatment, and look for recurrence)
<b>Placental Alkaline Phosphatase (PLAP)</b>	84080	Phosphatase, alkaline; isoenzymes	Metastatic germ cell tumors
<b>Thyroglobulin</b>	84432	Assay of thyroglobulin	Thyroid cancer
<b>Urokinase plasminogen</b>	88342	Immunohistochemistry or immunocytochemistry, per	Breast cancer

<b>activator (uPA) and plasminogen activator inhibitor (PAI-1)</b>		specimen; initial single antibody stain procedure	
<b>UroVysion</b>	88121	Cytopathology, in situ hybridization (e.g., FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; using computer-assisted technology	Bladder Cancer
<b>5-Protein signature (OVA1)</b>	88342	Immunohistochemistry or immunocytochemistry, per specimen; initial single antibody stain procedure	Ovarian cancer
<b>Nuclear matrix protein 22</b>	86386	Nuclear Matrix Protein 22 (NMP22), qualitative	Bladder cancer

\* CA-15-3 done only if clinically indicated.

\*\* PSA Cancer screening as per Daman's policy

#### Non- malignant conditions associated with rise in tumor markers:

Marker	Associated Non-malignant Conditions
<b>AFP</b>	Viral Hepatitis, liver injury, Irritable Bowel Disease, pregnancy.
<b>B-hCG</b>	Testicular cancer, marijuana smokers, pregnancy, gestational trophoblastic disease.
<b>CEA</b>	Smokers, IBD, hepatitis, cirrhosis, pancreatitis, gastritis
<b>CA-125</b>	Peritoneal irritation, endometriosis, pelvic inflammatory disease, hepatitis, cirrhosis, First trimester of pregnancy, pancreatitis, ovarian cysts
<b>PSA</b>	Prostatitis, benign prostatic hyperplasia.

## 4. Denial Codes

Code	Code description
MNEC-003	Service is not clinically indicated based on good clinical practice.
MNEC-004	Service is not clinically indicated based on good clinical practice, without additional supporting diagnosis/activities.
MNEC-005	Service/ supply may be appropriate, but too frequent.
CODE-010	Activity/ diagnosis inconsistent with clinician speciality.
PRCE-002	Payment is included in the allowance for another service.
PRCE-010	Use bundled code
NCOV-003	Service(s) is (are) not covered.

## 5. Appendices

### 5.1 References

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## 5.2 Revision History

Date	Change(s)
01-07-2012	V1.0
01-07-2013	V1.1 New template
15-07-2014	V2.0 Disclaimer updated as per system requirements
09-01-2019	V3.0 Content update
25-12-2024	V4.0 Content update
30-04-2025	V4.1 Content update Template update

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