

Natriuretic Peptide Testing

Adjudication Guideline

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Medical

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1. Abstract

1.1 For Members

Brain Natriuretic Peptide (BNP) test or NT-proBNP test is primarily used to aid in diagnosing or excluding heart failure in a person who is having symptoms.

1.2 For Medical Professionals

Brain Natriuretic Peptide (BNP) is a natriuretic hormone initially identified in the brain but released primarily from the heart's ventricles. Its release increases in heart failure (HF) in response to the strain on ventricular myocytes particularly due to the elevated filling pressures and exposure to neurohormones like norepinephrine and angiotensin.

Elevated plasma BNP levels strongly indicate abnormal ventricular function (i.e., HF), while low levels help to rule out decompensated HF.

2. Scope

This Adjudication Rule highlights the coverage and payment requirements by Daman as per policy terms and conditions for BNP Testing. It also highlights the medical criteria for coverage.

3. Adjudication Policy

3.1 Eligibility / Coverage Criteria

BNP test is covered for all health insurance plans if medically justified and not considered investigational. New best practices limit indiscriminate BNP testing in patients with acute dyspnoea. It is now primarily used to confirm or exclude heart failure when the diagnosis is uncertain.

BNP testing is recommended for:

- As a standardized diagnostic tool for suspected heart failure cases. such as dyspnoea and clinical uncertainty.
- Assessing prognosis or disease severity in chronic heart failure patients.
- Hospitalized patients for diagnosing acutely decompensated heart failure.
- Using NT-proBNP as an aid diagnostic test for diabetic patients type 2 as a screening for the diagnosis of heart failure in conjunction with the clinical information, examination and other data available to the physician.

3.2 Requirements for Coverage

Billing the test should fall under medical necessity and as per regulator payment rules and regulations and relevant coding manuals for ICD, CPT, etc.

3.3 Non-Coverage

Natriuretic peptide testing is not covered for the following indications:

- Individuals with difficulty of breathing attributed to preexisting respiratory illnesses such as COPD or Asthma, unless heart failure is suspected.
- For indications still considered investigational by current clinical standards.
- Serial testing in stable heart failure patients; BNP should only be measured at admission and discharge in hospitalized patients.
- When ordered by clinicians who are not directly managing heart failure.

3.4 Payment and Coding Rules

Please apply regulator payment rules and regulations and relevant coding manuals for ICD, CPT, etc. Kindly code the ICD-10 and the CPT codes to the highest level of specificity.

Table 1: Eligible clinicians

Eligible Grouping
Internal Medicine
Cardiology
Critical Care Medicine
Emergency Medicine
Cardiac/Cardiothoracic Sugery
General Pediatrics
Pediatrics Cardiology

4. Denial Codes

Denial codes with description are elaborated for reference. These are specialized codes directed by the regulators, that explains the reason of rejection of the service by Daman to the providers.

Code	Code Description
MNEC-004	Service is not clinically indicated based on good clinical practice, without additional supporting diagnoses/activities
CODE-010	Activity/diagnosis inconsistent with clinician specialty
AUTH-001	Prior-Approval is required and was not obtained

5. Appendices

5.1 References

<https://www.ahajournals.org/doi/10.1161/CIR.0000000000001063>
<https://www.nice.org.uk/guidance/qs103/chapter/quality-statement-1-single-measurement-of-natriuretic-peptide>
<https://www.nice.org.uk/guidance/ng106/resources/chronic-heart-failure-in-adults-diagnosis-and-management-pdf-66141541311685>
<https://bestpractice.bmj.com/topics/en-gb/3000107>
<https://www.doh.gov.ae/-/media/Feature/Research/Technology-status/NT-proBNP.ashx>
<https://www.aafp.org/pubs/afp/issues/2012/0415/p832.html>
<https://medlineplus.gov/lab-tests/natriuretic-peptide-tests-bnp-nt-probnp/>
<https://bestpractice.bmj.com/topics/en-gb/61/pdf/61/Heart%20failure%20with%20reduced%20ejection%20fraction.pdf>

5.2 Revision History

Date	Change(s)
01/07/2013	Release of V1.0
15/07/2014	Release of V2.0
26/09/2018	Release of V3.0 General content update Restricted ordering clinicians Created system support
29/08/2025	Release of V4.0 General content update New template Clinicians' restriction Rule Update

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