

## **190.30 - Tumor Antigen by Immunoassay CA 19-9**

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### **Description**

Immunoassay determinations of the serum levels of certain proteins or carbohydrates serve as tumor markers. When elevated, serum concentration of these markers may reflect tumor size and grade. This policy specifically addresses the following tumor antigen: CA19-9.

### **HCPCS Codes (Alphanumeric, CPT® AMA)**

| Code  | Description                                          |
|-------|------------------------------------------------------|
| 86301 | Immunoassay for tumor antigen, quantitative; CA 19-9 |

### **ICD-10-CM Codes Covered by Medicare Program**

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of  
Downloads: Lab Code List, at  
<http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html>

| Code   | Description                                                         |
|--------|---------------------------------------------------------------------|
| C22.1  | Intrahepatic bile duct carcinoma                                    |
| C23    | Malignant neoplasm of gallbladder                                   |
| C24.0  | Malignant neoplasm of extrahepatic bile duct                        |
| C24.1  | Malignant neoplasm of ampulla of Vater                              |
| C24.8  | Malignant neoplasm of overlapping sites of biliary tract            |
| C24.9  | Malignant neoplasm of biliary tract, unspecified                    |
| C25.0  | Malignant neoplasm of head of pancreas                              |
| C25.1  | Malignant neoplasm of body of pancreas                              |
| C25.2  | Malignant neoplasm of tail of pancreas                              |
| C25.3  | Malignant neoplasm of pancreatic duct                               |
| C25.4  | Malignant neoplasm of endocrine pancreas                            |
| C25.7  | Malignant neoplasm of other parts of pancreas                       |
| C25.8  | Malignant neoplasm of overlapping sites of pancreas                 |
| C25.9  | Malignant neoplasm of pancreas, unspecified                         |
| C78.7  | Secondary malignant neoplasm of liver and intrahepatic bile duct    |
| C78.80 | Secondary malignant neoplasm of unspecified digestive organ         |
| C78.89 | Secondary malignant neoplasm of other digestive organs              |
| D37.6  | Neoplasm of uncertain behavior of liver, gallbladder and bile ducts |
| D37.8  | Neoplasm of uncertain behavior of other specified digestive organs  |
| D37.9  | Neoplasm of uncertain behavior of digestive organ, unspecified      |

| <b>Code</b> | <b>Description</b>                                               |
|-------------|------------------------------------------------------------------|
| G89.3       | Neoplasm related pain (acute) (chronic)                          |
| M33.03      | Juvenile dermatomyositis without myopathy                        |
| M33.13      | Other dermatomyositis without myopathy                           |
| M33.93      | Dermatopolymyositis, unspecified without myopathy                |
| R97.8       | Other abnormal tumor markers                                     |
| Z85.068     | Personal history of other malignant neoplasm of small intestine  |
| Z85.07      | Personal history of malignant neoplasm of pancreas               |
| Z85.09      | Personal history of malignant neoplasm of other digestive organs |

***Indications***

Multiple tumor markers are available for monitoring the response of certain malignancies to therapy and assessing whether residual tumor exists post-surgical therapy.

Levels are useful in following the course of patients with established diagnosis of pancreatic and biliary ductal carcinoma. The test is not indicated for diagnosing these two diseases.

***Limitations***

These services are not covered for the evaluation of patients with signs or symptoms suggestive of malignancy. The service may be ordered at times necessary to assess either the presence of recurrent disease or the patient’s response to treatment with subsequent treatment cycles.

***ICD-10-CM Codes That Do Not Support Medical Necessity***

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

***Sources of Information***

Clinical Pancreatic Guideline for the Use of Tumor Markers in Breast and Colorectal Cancer, American Society of Clinical Oncology. J Clin Oncol 14:2843-2877, 1996.

Richter JM, Christensen MR, Rustgi AK, and Silverstein MD. The Clinical Utility of the CA19-9 Radioimmunoassay for the Diagnosis of Pancreatic Cancer Presenting as Pain or Weight Loss: A Cost Effective Analysis. Arch Intern Med 1989, 149:2292-2297.

Safi F, SchlosseW, Falkenreck S, et. al. Prognostic Value of CA 19-9 Serum Course in Pancreatic Cancer. Hepaetogastroenterology 1998 Jan-Feb; 45(19):253-9.