Policy Name: Whole Genome Sequencing
Effective Date: 6/15/2016

Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica plans. Please refer to the member’s plan document for specific coverage information. If there is a difference between this general information and the member’s plan document, the member’s plan document will be used to determine coverage. With respect to Medicare, Medicaid and MinnesotaCare members, this policy will apply unless these programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care and treatment.

Coverage Policy
Whole genome sequencing is investigative and therefore NOT COVERED.

Description
Deoxyribonucleic acid (DNA) is a chemical compound that contains the genetic instructions needed to develop and direct the activities of every organism. A genome is an organism’s complete set of DNA, including all of its genes. Changes in the genes that make up the genome, such that the sequence differs from what is found in most people, are called mutations or variants. Mutations can be beneficial, neutral or harmful. Harmful mutations can increase an individual’s risk of developing certain diseases.

Major advances in technology have made it possible to do large-scale sequencing, including whole genome sequencing (WGS). High-throughput next generation sequencing (NGS), also known as massively parallel sequencing, permits rapid sequencing of large numbers of segments of DNA at a time, as opposed to initial approaches that involved sequencing one strand of DNA at a time. Whole genome sequencing refers to determining the DNA sequence of the entire genome.

Considerable interest exists in using WGS in the clinical setting for the evaluation and management of many conditions, including cancer, adult neurologic disorders, neurodevelopmental disorders in children, and a number of other undiagnosed genetic disorders. However, while WGS has the advantages of speed and efficiency, many limitations exist, including technical and implementation challenges, the implications of variants of unknown significance and incidental findings, and legal, ethical and societal issues.

FDA Approval
On November 19, 2013, the FDA announced the first regulatory clearance of the Illumina MiSeq Dx, a sophisticated high-throughput DNA sequencing device. However, genetic tests are regulated under the Clinical Laboratory Improvement Amendments (CLIA) Act of 1988. Premarket approval from the FDA is not required as long as the assay is performed in a laboratory facility that observes CLIA regulations and the test is not marketed for general distribution.
Prior Authorization
Prior authorization is not applicable. Claims for this service are subject to retrospective review and denial of coverage, as investigative services are not eligible for reimbursement.

Coding Considerations
Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

CPT Codes
• 81425 - Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis
• 81426 - Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator genome (eg, parents, siblings) (List separately in addition to code for primary procedure)
• 81427 - Genome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained genome sequence (eg, updated knowledge or unrelated condition/syndrome)

Original Effective Date: 1/1/2014
Re-Review Date(s): 6/15/2016