
ICD Update: Cigna Coverage of Vitamin D Testing

September 10, 2019

Effective August 19, 2019, Cigna has updated its Vitamin D Testing Medical Coverage Policy (Coverage Policy Number 0526). The updated policy addresses medical necessity and associated ICD-10 codes for serum Vitamin D testing. If a submitted claim does not include a CPT and ICD-10 that denotes medical necessity per this updated policy, your patients may receive an invoice for payment of costs not covered by their Cigna benefit plan.

See below for the Vitamin D Coverage Policy:

Vitamin D testing is considered medically necessary in a non-pregnant individual age 18 – 64 years for any of the following:

- Condition or medical diagnosis associated with Vitamin D deficiency (See Appendix A)
- Previously documented Vitamin D deficiency
- Known or suspected excessive Vitamin D blood levels (i.e., toxicity)

Vitamin D testing for any other indication including screening in the general population is considered not medically necessary.

Vitamin D testing (CPT 82306) more frequently than twice in 12 rolling months is considered not medically necessary for any diagnosis other than chronic kidney disease (CKD) or intestinal malabsorption.

Vitamin D testing utilizing both CPT 82306 and CPT 82652 in combination is considered not medically necessary.

To review the ICD codes guidelines associated with this Vitamin D Coverage Policy, visit https://cignaforhcp.cigna.com/public/content/pdf/coveragePolicies/medical/mm_0526_coveragepositioncriteria_vitamin_D_testing.pdf (pages 11 - 14). You may also contact your PathGroup Territory Account Manager to request a hard copy of the policy.

**For further questions, please contact Client Services
at 615-562-9300 or 1-888-474-5227.**