Local Coverage Determination (LCD): Measurement of Salivary Hormones (L36857)

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Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
Noridian Healthcare Solutions, LLC	A and B MAC	02101 - MAC A	J - F	Alaska
Noridian Healthcare Solutions, LLC	A and B MAC	02102 - MAC B	J - F	Alaska
Noridian Healthcare Solutions, LLC	A and B MAC	02201 - MAC A	J - F	Idaho
Noridian Healthcare Solutions, LLC	A and B MAC	02202 - MAC B	J - F	Idaho
Noridian Healthcare Solutions, LLC	A and B MAC	02301 - MAC A	J - F	Oregon
Noridian Healthcare Solutions, LLC	A and B MAC	02302 - MAC B	J - F	Oregon
Noridian Healthcare Solutions, LLC	A and B MAC	02401 - MAC A	J - F	Washington
Noridian Healthcare Solutions, LLC	A and B MAC	02402 - MAC B	J - F	Washington
Noridian Healthcare Solutions, LLC	A and B MAC	03101 - MAC A	J - F	Arizona
Noridian Healthcare Solutions, LLC	A and B MAC	03102 - MAC B	J - F	Arizona
Noridian Healthcare Solutions, LLC	A and B MAC	03201 - MAC A	J - F	Montana
Noridian Healthcare Solutions, LLC	A and B MAC	03202 - MAC B	J - F	Montana
Noridian Healthcare Solutions, LLC	A and B MAC	03301 - MAC A	J - F	North Dakota
Noridian Healthcare Solutions, LLC	A and B MAC	03302 - MAC B	J - F	North Dakota
Noridian Healthcare Solutions, LLC	A and B MAC	03401 - MAC A	J - F	South Dakota
Noridian Healthcare Solutions, LLC	A and B MAC	03402 - MAC B	J - F	South Dakota
Noridian Healthcare Solutions, LLC	A and B MAC	03501 - MAC A	J - F	Utah
Noridian Healthcare Solutions, LLC	A and B MAC	03502 - MAC B	J - F	Utah
Noridian Healthcare Solutions, LLC	A and B MAC	03601 - MAC A	J - F	Wyoming
Noridian Healthcare Solutions, LLC	A and B MAC	03602 - MAC B	J - F	Wyoming

LCD Information

Document Information

LCD ID

L36857

Original Effective Date

For services performed on or after 07/21/2017

LCD Title

Revision Effective Date

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Proposed LCD in Comment Period

N/A

Source Proposed LCD

DL36857

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Revision Ending Date

N/A

Retirement Date

N/A

Notice Period Start Date

06/05/2017

Notice Period End Date

07/20/2017

You may also contact us at ub04@aha.org.

CMS National Coverage Policy

Code of Federal Regulations:

42 CFR Sections 410.32(a) & 410.32(a)(3) require that clinical laboratory services be ordered and used promptly by the physician (or other treating practitioner acting within the scope of his or her license and Medicare requirements) who is treating the beneficiary.

42CFR411.15 excludes from coverage examinations performed for a purpose other than treatment or diagnosis of a specific illness, symptoms, complaint, or injury with specific legislative enactments as the only exceptions.

CMS Manual System, Pub. 100-02, Medicare Benefit Policy Manual, Chapter 6, §§20.4.4 and 20.4.5.

Coverage Guidance

Coverage Indications, Limitations, and/or Medical Necessity

Hormones, both endocrine and exocrine, are secreted into various bodily fluids and their measurement can often diagnose diseases or be used to follow the course of a disease. Traditionally endocrine hormones are measured in serum, plasma, or urine. Measurements of hormones at certain times of the day, or after various attempts at suppression or stimulation can be used for diagnoses of endocrine diseases. Recently some labs have attempted to develop measurement of hormones in salivary secretions. Material is collected from saliva and sent to a lab for measurement. The convenience of collection without need of arterial or venipuncture simplifies collection, but the accuracy of measurement and lack of standardization makes the values determined still investigational. Noridian Healthcare Solutions currently considers salivary cortisol collected in the evening for diagnosis of Cushing's syndrome as the only medically necessary and reasonable hormone measurement from salivary fluid. All other determinations of salivary hormones (e.g., thyroid, testosterone, estrogen, parathyroid, growth hormone, etc.) are considered investigational.

N/A

Analysis of Evidence (Rationale for Determination)

N/A

General Information

Associated Information

If requested, chart documentation would show signs, symptoms, or clinical reasons why Cushing's syndrome was being tested for.

No comments were received for this draft LCD for comment period ending 12/15/2016.

Sources of Information

- 1. Aetna, Salivary Test Policy.
- 2. American Association of Clinical Endocrinologists (AACE) Medical Guidelines for Clinical Practice for the Diagnosis and Treatment of Menopause. *Endocrine Practice* Vol 17 (Suppl 6) November/December 2011.
- 3. Blue Cross Blue Shield of Florida, Salivary and Blood Hormone Testing.
- 4. Blue Cross Blue Shield of Idaho, Salivary Hormone Testing, MP 2.04.301.
- 5. Blue Cross Blue Shield of North Carolina Policy, Salivary Hormone Test.
- 6. Blue Cross Blue Shield of Tennessee, Salivary Testing for Steroid Hormone Levels.
- 7. Clinical practice guidelines for hypothyroidism in adults: cosponsored by the American Association of Clinical Endocrinologists and the *American Thyroid Association*.
- 8. Cushing syndrome: update on testing; *Endocrinol Metab Clin North Am.* 2015 Mar;44(1):43-50. doi: 10.1016/j.ecl.2014.10.005. Epub 2014 Nov 4.
- 9. Salivary Hormone Measurement Using LC/MS/MS: Specific and Patient-Friendly Tool for Assessment of Endocrine Function. Tatsuya Higashi. 2012 *The Pharmaceutical Society of Japan*.
- 10. Saliva as a diagnostic tool for oral and systemic diseases. Mohammad A. Javaid, Ahad S. Ahmed, Robert Durand, Simon D. Tran. J Oral Biol Craniofac Res. 2016 Jan-Apr;6(1):66-75. doi: 10.1016/j.jobcr.2015.08.006. Epub 2015 Sep 9.
- 11. Standardizing Hormone Measurements; National Center for Environmental Health Division of Laboratory Sciences. U.S. Department of Health and Human Services, *Centers for Disease Control and Prevention National Center for Environmental Health Division of Laboratory Sciences*.
- 12. Taking on Free Hormone Measurement and Interpretation. Joesph R. Wiencek, PhD, *American Association for Clinical Chemistry (AACC)*, August 1, 2016, CLN Daily.
- 13. Wellmark Medical Policy, Saliva Hormone Tests.

Bibliography

N/A

Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION	REASON(S) FOR CHANGE
11/01/2019	R3	The LCD is revised to remove CPT/HCPCS codes in the Keyword Section of the LCD.	Other (The LCD is revised to remove CPT/HCPCS codes in the Keyword Section of the LCD.
		At this time 21st Century Cures Act will apply to new and revised LCDs that restrict coverage which requires comment and notice. This revision is not a restriction to the coverage determination; and, therefore not all the fields included on the LCD are applicable as noted in this policy.)

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REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION	REASON(S) FOR CHANGE
11/01/2019	R2	11/01/2019: At this time 21st Century Cures Act will apply to new and revised LCDs that restrict coverage which requires comment and notice. This revision is not a restriction to the coverage. As required by CR 10901, all billing and coding information has been moved to the companion	 Provider Education/Guidance Revisions Due To Code Removal
		article, this article is linked to the LCD.	
10/01/2017	R1	DATE (08/23/2017): At this time 21st Century Cures Act will apply to new and revised LCDs that restrict coverage which requires comment and notice. This revision is not a restriction to the coverage determination; and, therefore not all the fields included on the LCD are applicable as noted in this policy. Effective 10/1/2017, LCD is revised per the annual ICD-10-CM code update to: Add ICD-10-CM codes: E27.8	Revisions Due To ICD-10-CM Code Changes

Associated Documents

Attachments

N/A

Related Local Coverage Documents

Article(s)

A57613 - Billing and Coding: Measurement of Salivary Hormones

LCD(s)

DL36857

- (MCD Archive Site)

Related National Coverage Documents

N/A

Public Version(s)

Updated on 01/29/2020 with effective dates 11/01/2019 - N/A Updated on 10/22/2019 with effective dates 11/01/2019 - N/A

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Keywords

N/A