



## 190.29 - Tumor Antigen by Immunoassay CA 15-3/CA 27.29

### Description

Immunoassay determinations of the serum levels of certain proteins or carbohydrates serve as tumor markers. When elevated, serum concentration of markers may reflect tumor size & grade. This policy specifically addresses the following tumor antigens: CA 15-3 and CA 27.29

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

| Code  | Description  |
|-------|--|
| 86300 | Immunoassay for tumor antigen, quantitative; CA 15-3 (27.29) |

### 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   |
|----------|---|
| C44.1321 | Sebaceous cell carcinoma of skin of right upper eyelid, including canthus |
| C44.1322 | Sebaceous cell carcinoma of skin of right lower eyelid, including canthus |
| C44.1391 | Sebaceous cell carcinoma of skin of left upper eyelid, including canthus  |
| C44.1392 | Sebaceous cell carcinoma of skin of left lower eyelid, including canthus  |
| C50.011  | Malignant neoplasm of nipple and areola, right female breast              |
| C50.012  | Malignant neoplasm of nipple and areola, left female breast               |
| C50.019  | Malignant neoplasm of nipple and areola, unspecified female breast        |
| C50.021  | Malignant neoplasm of nipple and areola, right male breast                |
| C50.022  | Malignant neoplasm of nipple and areola, left male breast                 |
| C50.029  | Malignant neoplasm of nipple and areola, unspecified male breast          |
| C50.111  | Malignant neoplasm of central portion of right female breast              |
| C50.112  | Malignant neoplasm of central portion of left female breast               |
| C50.119  | Malignant neoplasm of central portion of unspecified female breast        |
| C50.121  | Malignant neoplasm of central portion of right male breast                |
| C50.122  | Malignant neoplasm of central portion of left male breast                 |
| C50.129  | Malignant neoplasm of central portion of unspecified male breast          |



**Medicare National Coverage Determinations (NCD)  
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| <b>Code</b> | <b>Description</b>  |
|-------------|---|
| C50.211     | Malignant neoplasm of upper-inner quadrant of right female breast       |
| C50.212     | Malignant neoplasm of upper-inner quadrant of left female breast        |
| C50.219     | Malignant neoplasm of upper-inner quadrant of unspecified female breast |
| C50.221     | Malignant neoplasm of upper-inner quadrant of right male breast         |
| C50.222     | Malignant neoplasm of upper-inner quadrant of left male breast          |
| C50.229     | Malignant neoplasm of upper-inner quadrant of unspecified male breast   |
| C50.311     | Malignant neoplasm of lower-inner quadrant of right female breast       |
| C50.312     | Malignant neoplasm of lower-inner quadrant of left female breast        |
| C50.319     | Malignant neoplasm of lower-inner quadrant of unspecified female breast |
| C50.321     | Malignant neoplasm of lower-inner quadrant of right male breast         |
| C50.322     | Malignant neoplasm of lower-inner quadrant of left male breast          |
| C50.329     | Malignant neoplasm of lower-inner quadrant of unspecified male breast   |
| C50.411     | Malignant neoplasm of upper-outer quadrant of right female breast       |
| C50.412     | Malignant neoplasm of upper-outer quadrant of left female breast        |
| C50.419     | Malignant neoplasm of upper-outer quadrant of unspecified female breast |
| C50.421     | Malignant neoplasm of upper-outer quadrant of right male breast         |
| C50.422     | Malignant neoplasm of upper-outer quadrant of left male breast          |
| C50.429     | Malignant neoplasm of upper-outer quadrant of unspecified male breast   |
| C50.511     | Malignant neoplasm of lower-outer quadrant of right female breast       |
| C50.512     | Malignant neoplasm of lower-outer quadrant of left female breast        |
| C50.519     | Malignant neoplasm of lower-outer quadrant of unspecified female breast |
| C50.521     | Malignant neoplasm of lower-outer quadrant of right male breast         |
| C50.522     | Malignant neoplasm of lower-outer quadrant of left male breast          |
| C50.529     | Malignant neoplasm of lower-outer quadrant of unspecified male breast   |
| C50.611     | Malignant neoplasm of axillary tail of right female breast              |
| C50.612     | Malignant neoplasm of axillary tail of left female breast               |
| C50.619     | Malignant neoplasm of axillary tail of unspecified female breast        |
| C50.621     | Malignant neoplasm of axillary tail of right male breast                |



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| Code    | Description  |
|---------|--|
| C50.622 | Malignant neoplasm of axillary tail of left male breast                        |
| C50.629 | Malignant neoplasm of axillary tail of unspecified male breast                 |
| C50.811 | Malignant neoplasm of overlapping sites of right female breast                 |
| C50.812 | Malignant neoplasm of overlapping sites of left female breast                  |
| C50.819 | Malignant neoplasm of overlapping sites of unspecified female breast           |
| C50.821 | Malignant neoplasm of overlapping sites of right male breast                   |
| C50.822 | Malignant neoplasm of overlapping sites of left male breast                    |
| C50.829 | Malignant neoplasm of overlapping sites of unspecified male breast             |
| C50.911 | Malignant neoplasm of unspecified site of right female breast                  |
| C50.912 | Malignant neoplasm of unspecified site of left female breast                   |
| C50.919 | Malignant neoplasm of unspecified site of unspecified female breast            |
| C50.921 | Malignant neoplasm of unspecified site of right male breast                    |
| C50.922 | Malignant neoplasm of unspecified site of left male breast                     |
| C50.929 | Malignant neoplasm of unspecified site of unspecified male breast              |
| C79.2   | Secondary malignant neoplasm of skin   |
| C79.81  | Secondary malignant neoplasm of breast   |
| G89.3   | Neoplasm related pain (acute) (chronic)  |
| R97.8   | Other abnormal tumor markers   |
| Z85.3   | Personal history of malignant neoplasm of breast                               |
| Z86.002 | Personal history of in-situ neoplasm of other and unspecified genital organs   |
| Z86.003 | Personal history of in-situ neoplasm of oral cavity, esophagus and stomach     |
| Z86.004 | Personal history of in-situ neoplasm of other and unspecified digestive organs |
| Z86.005 | Personal history of in-situ neoplasm of middle ear and respiratory system      |
| Z86.006 | Personal history of melanoma in-situ   |
| Z86.007 | Personal history of in-situ neoplasm of skin                                   |

**Indications**

Multiple tumor markers are available for monitoring the response of certain malignancies to therapy and assessing whether a residual tumor exists post-surgical therapy. CA 15-3 is often

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medically necessary to aid in the management of patients with breast cancer. Serial testing must be used in conjunction with other clinical methods for monitoring breast cancer. For monitoring, if medically necessary, use consistently either CA 15-3 or CA 27.29, not both. CA 27.29 is equivalent to CA 15-3 in its usage in management of patients with breast cancer.

**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.

Chan DW, Beveridge RA, Muss H, et al. Use of Triquant BR Radioimmunoassay for Early Detection of Breast Cancer Recurrence in Patients with Stage II & Stage III Disease. J Clin Oncol 1977, 15(6):2322-2328.

Bone GG, von Mensdorff-Pouilly S, Kenemans P, van Kamp GJ, et al. Clinical and Technical Evaluation of ACS BR Serum Assay of MUC-1 Gene Derived Glycoprotein in Breast Cancer, and Compared with CA15-3 Assays. Clin Chem 1997, 43(4):585-593.