



Aetna Better Health® of Illinois

# AETNA BETTER HEALTH® d/b/a Aetna Better Health of Illinois Policy

Policy Name: Allergy Testing	Page: 1 of 2
Department: Medical Policy & Program Solutions	
Subsection:	Effective Date: 12/01/2020
Applies to: Aetna Better Health of Illinois	

**PURPOSE:** Per Aetna Better Health of Illinois Policy, specific allergy testing and allergy immunotherapy are considered medically necessary for members with clinically significant allergic symptoms.

## **STATEMENT OF OBJECTIVE/OVERVIEW:**

Allergy Testing - Per policy:

-Ophthalmic and/or direct nasal mucous membrane tests are not covered

-Allergy testing (allergen specific IgE/percutaneous/intracutaneous testing) should be reported with a supporting diagnosis indicating significant allergic symptoms.

-Patch/application testing should be reported with a supporting diagnosis indicating skin-related allergies.

-Photo patch testing should be reported with a supporting diagnosis indicating photoallergic responses/dermatitis/solar urticaria.

-Food ingestion challenge testing should be reported with a supporting diagnosis indicating food allergies.

-Allergy immunotherapy/professional services for supervision of preparation/provision of antigens should be reported with a supporting diagnosis indicating significant allergic symptoms

-Rapid desensitization procedures should be reported with a supporting diagnosis indicating allergies to drugs/insects/etc.



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## **DEFINITIONS:**

Allergy Testing	Allergy testing, also known as skin, prick or blood testing, is a method for determining to what substances a person is allergic.
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## **LEGAL/CONTRACT REFERENCE:**

Review/Revision History	