of Tennessee

Policy

Reimbursement Policy

Fecal Analysis in the Diagnosis of Intestinal Dysbiosis and Fecal Microbiota Transplant Testing

I. Policy Description

Intestinal dysbiosis is defined as a disruption or imbalance of the intestinal microbial ecology.[1] Dysbiosis is associated with many diseases, including irritable bowel syndrome (IBS), inflammatory bowel diseases (IBD), celiac disease, multiple sclerosis, Sjogren's Syndrome, obesity, allergy, and diabetes.[2,3]

II. Indications and/or Limitations of Coverage

Application of coverage criteria is dependent upon an individual's benefit coverage at the time of the request. Specifications pertaining to Medicare and Medicaid can be found in the "Applicable State and Federal Regulations" section of this policy document.

1) Prior to donation for a fecal microbiota transplant (FMT), analysis by bacterial culture of the donor fecal sample for the following microorganisms **MEETS COVERAGE CRITERIA**:
   a) Extended spectrum beta-lactamase (ESBL)-producing *Enterobacteriaceae*
   b) Vancomycin-resistant *Enterococci* (VRE)
   c) Carbapenem-resistant *Enterobacteriaceae* (CRE)
   d) Methicillin-resistant *Staphylococcus aureus* (MRSA)
   e) *Campylobacter*
   f) *Shigella*
   g) *Salmonella*
2) Prior to donation for an FMT, analysis by nucleic acid amplification testing (NAAT) of the donor fecal sample for the following microorganisms **MEETS COVERAGE CRITERIA**:
   a) *Clostridium difficile*
   b) *Campylobacter*

c) *Salmonella*

d) *Shigella*

e) Shiga toxin-producing *Escherichia coli*

f) Norovirus

g) Rotavirus

h) COVID-19 (SARS-CoV-2)

3) Prior to donation for an FMT, analysis by NAAT of the donor fecal sample for the following microorganisms **DOES NOT MEET COVERAGE CRITERIA**:

a) Extended spectrum beta-lactamase (ESBL)-producing *Enterobacteriaceae*

b) Vancomycin-resistant *Enterococci* (VRE)

c) Carbapenem-resistant *Enterobacteriaceae* (CRE)

d) Methicillin-resistant *Staphylococcus aureus* (MRSA)

e) Any other microorganisms not listed above

The following does not meet coverage criteria due to a lack of available published scientific literature confirming that the test(s) is/are required and beneficial for the diagnosis and treatment of an individual's illness.

4) As a diagnostic test for the evaluation of intestinal dysbiosis, irritable bowel syndrome, malabsorption, **or** small intestinal overgrowth of bacteria, fecal analysis of the following components **DOES NOT MEET COVERAGE CRITERIA**:

a) Triglycerides

b) Chymotrypsin

c) Iso-butyrate, iso-valerate, and n-valerate

d) Meat and vegetable fibers

e) Long chain fatty acids

f) Cholesterol

g) Total short chain fatty acids

h) Quantification of *Lactobacilli*, bifidobacteria, and *E. coli* and other "potential pathogens," including *Aeromona, Bacillus cereus, Campylobacter, Citrobacter, Klebsiella, Proteus, Pseudomonas, Salmonella, Shigella, S. aureus, Vibrio*

i) For the identification and quantitation of fecal yeast (including *C. albicans, C. tropicalis, Rhodoptorul* and *Geotrichum*)

j) N-butyrate

k) Beta-glucoronidase

l) pH

m) Short chain fatty acid distribution (adequate amount and proportions of the different short chain fatty acids reflect the basic status of intestinal metabolism)

n) Fecal secretory IgA

III. Applicable State and Federal Regulations

DISCLAIMER: If there is a conflict between this Policy and any relevant, applicable government policy for a particular member [e.g., Local Coverage Determinations (LCDs) or National Coverage Determinations (NCDs) for Medicare and/or state coverage for Medicaid], then the government policy will be used to make the determination. For the most up-to-date Medicare policies and coverage, please visit the Medicare search website: https://www.cms.gov/medicare-coverage-database/search.aspx. For the most up-to-date Medicaid policies and coverage, visit the applicable state Medicaid website.

Food and Drug Administration (FDA)

Many labs have developed specific tests that they must validate and perform in house. These laboratory-developed tests (LDTs) are regulated by the Centers for Medicare and Medicaid (CMS) as high-complexity tests under the Clinical Laboratory Improvement Amendment of 1988 (CLIA '88). LDTs are not approved or cleared by the U. S. Food and Drug Administration; however, FDA clearance or approval is not currently required for clinical use.

IV. Applicable CPT/HCPCS Procedure Codes

CPT	Code Description
82542	Column chromatography, includes mass spectrometry, if performed (e.g., HPLC, LC, LC/MS, LC/MS-MS, GC, GC/MS-MS, GC/MS, HPLC/MS), non-drug analyte(s) not elsewhere specified, qualitative or quantitative, each specimen
82705	Fat or lipids, feces; qualitative
83986	pH; body fluid, not otherwise specified
84311	Spectrophotometry, analyte not elsewhere specified
87045	Culture, bacterial; stool, aerobic, with isolation and preliminary examination (e.g., KIA, LIA), Salmonella and Shigella species

87046	Culture, bacterial; stool, aerobic, additional pathogens, isolation and presumptive identification of isolates, each plate
87075	Culture, bacterial; any source, except blood, anaerobic with isolation and presumptive identification of isolates
87076	Culture, bacterial; anaerobic isolate, additional methods required for definitive identification, each isolate
87077	Culture, bacterial; aerobic isolate, additional methods required for definitive identification, each isolate
87081	Culture, presumptive, pathogenic organisms, screening only
87102	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; other source (except blood)
87106	Culture, fungi, definitive identification, each organism; yeast
87493	Infectious agent detection by nucleic acid (DNA or RNA); Clostridium difficile, toxin gene(s), amplified probe technique
87500	Infectious agent detection by nucleic acid (DNA or RNA); vancomycin resistance (eg, enterococcus species van A, van B), amplified probe technique
87641	Infectious agent detection by nucleic acid (DNA or RNA); Staphylococcus aureus, methicillin resistant, amplified probe technique
87798	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism
89160	Meat fibers, feces
S3708	Gastrointestinal fat absorption study

Procedure codes appearing in Medical Policy documents are included only as a general reference tool for each policy. They may not be all-inclusive.

V. Evidence-based Scientific References

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VI. Revision History

Revision Date	Summary of Changes
09/04/2025	Reviewed and Updated: Updated the background, guidelines and recommendations, and evidence-based scientific references. Literature review did not necessitate any modifications to coverage criteria.