Aetna Better Health® of Illinois

Reimbursement Policy Statement Illinois Medicaid

Effective Date	Next Annual Review	Policy Number
12/01/2020	09/01/2027	ABHIL-RP-0011

Policy Name	Department
Allergy Testing and Immunotherapy	Claims Operations Medical Payment

Policy Type			
Medical	Administrative	Pharmacy	Reimbursement

Aetna Better Health of Illinois (ABH IL) implements comprehensive and robust policies and procedures to ensure alignment with Illinois Department of Health Care and Family Services (HFS) and to warrant that regulatory standards are met.

ABH IL reimbursement policies are intended to provide a general reference for claims filing, coding, documentation guidelines and administrative functions. Providers are ultimately responsible for submission of accurate reporting of services provided.

Reimbursement of reported services is subject to member benefit, eligibility on date of service, medical necessity, related plan policies and procedures, correct coding and clinical editing logic, provider contracts and all applicable plan documentation and guidelines set forth by Illinois Department of Health Care and Family Services (HFS). Coding methodology, regulatory requirements, industry standard claims logic, guidance from specialty organizations and other factors are considered in the development of plan policies. ABH IL retains the right to change, amend or withdraw this policy as needed, at any time.

CONTENTS OF POLICY:

Aetna Better Health® of Illinois

A. Policy

This policy is provided as a guide to medical coding and editing guidelines for the appropriate reporting of allergy testing and immunotherapy services. This policy aligns with guidance from AMA CPT Coding Guidelines for coding and reporting of allergy and clinical immunology, ICD-10-CM Coding Guidelines, guidance issued by the American Academy of Allergy, Asthma and Immunology, Aetna Clinical Policy for Allergy and Hypersensitivity treatment as well as Illinois Department of Health Care and Family Services (HFS) guidance.

B. Overview

This policy outlines the coding and editing guidelines for reporting of various allergy testing and immunotherapy services and applies to all professional and facility claim types. An allergy is a hypersensitive reaction that manifests in various forms such as allergic asthma, hay fever or eczema. Reactions can occur within minutes to a few hours after exposure to an antigen. The most common types of allergies are rhinitis, asthma, food allergies, insect sting allergies, drug allergies and contact dermatitis.

Allergy testing identifies a person's allergy triggers or allergens, the degree of the reaction and guides providers on treatment and/or management of the allergy. Allergy testing can be conducted by several methods such as various skin testing, oral testing, nasal or laboratory-based testing.

Diagnosis Coding

Allergy testing and allergen immunotherapy services are expected to be reported with an ICD-10-CM diagnosis code that indicates allergic symptoms. Services reported with an ICD-10-CM code that does not indicate allergic symptoms will be denied.

Food ingestion testing is expected to be reported with an appropriate ICD-10-CM diagnosis code that indicates food allergies as indicated in this policy. Testing reported with a diagnosis code not indicated as appropriate in this policy will be denied.

Patch testing, photo patch testing and rapid desensitization are expected to be reported with an appropriate ICD-10-CM diagnosis code as indicated in this policy. Reported with a diagnosis code not indicated as appropriate for the service reported in this policy will be denied.

Preparation and Provision of Antigens

In accordance with guidance issued by the American Academy of Allergy, Asthma, and Immunology, when reporting professional services for the supervision of preparation and provision of antigens for allergen immunotherapy with CPT code 95165, the number of allergen units provided to a patient should not exceed 120 units per year. Units reported above 120 per year will be denied.

Mucous Membrane Tests

Ophthalmic and/or direct nasal mucous membrane tests are considered noncovered services. If reported these CPT codes will be denied.

C. Definitions

Term	Definition
Aetna Better Health of Illinois (ABHIL)	A subsidiary of CVS Health Corporation, Medicaid subsidiary that provides plan management and other administrative services for the Illinois Medicaid program.
American Academy of Allergy, Asthma and Immunology	The professional organization that represents allergists, immunologists, and related specialists with a stated mission of advancing the knowledge and practice of allergy, asthma, and immunology to promote optimal patient care.
American Medical Association (AMA)	A professional group that publishes research to advance public health and advocates for the interests of registered physician-members.
Centers for Medicare & Medicaid Services (CMS)	The federal agency that administers the Medicare program as well as works with the individual states to administer state Medicaid and Children's Health Insurance Programs.
Current Procedural Terminology (CPT)	A medical code set maintained by the American Medical Association through the CPT Editorial Panel. The CPT code set (copyright protected by the AMA) describes medical, surgical, and diagnostic services and is designed to communicate uniform information about medical services and procedures among physicians, coders, patients, accreditation organizations, and payers for administrative, financial, and analytical purposes.
Illinois Department of Health Care and Family Services (HFS)	The Department of Healthcare and Family Services administers health insurance programs for children, pregnant women, and adults who are residents of Illinois.
International Statistical Classification of Diseases (ICD-10-CM)	The 10th revision of the (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.
Medicaid	The state administered program that provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities, according to federal requirements. The program is funded jointly by states and the federal government.

Medicare	Medicare is a health insurance program for: people aged sixty-five (65) or older, people under age sixty-five (65) with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).

D. Reimbursement Guidelines

ABH IL will only reimburse for the appropriate reporting of allergy testing and immunotherapy services when

- Allergy testing and immunotherapy services are reported with a diagnosis code that indicates allergic symptoms
- No more than 120 units of CPT code 95165 are reported in a year by any provider
- Food ingestion testing is reported with an appropriate diagnosis code as indicated in this policy
- Patch and photo patch testing are reported with an appropriate diagnosis code as indicated in this policy
- Rapid desensitization procedures are reported with an appropriate diagnosis code as indicated in this policy

Claims that are submitted will be denied when

- Allergy testing and allergen immunotherapy services are reported without a diagnosis code that indicates allergic symptoms
- A quantity greater than the allowed 120 units of CPT code 95165 are reported in a year by any provider
- Food ingestion testing is reported with a diagnosis code not indicated as appropriate in this policy
- Patch and photo patch testing are reported with a diagnosis code not indicated as appropriate in this policy
- Rapid desensitization procedures are reported with a diagnosis code not indicated as appropriate in this policy
- Ophthalmic and/or direct nasal mucous membrane tests are reported as these are non-covered services

The medical record documentation is expected to support the specific CPT, HCPCS and ICD-10-CM code(s) and any applicable modifier(s) reported.

E. Codes/Condition of Coverage

CPT Codes

95004	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, including test interpretation and report, specify number of tests
95017	Allergy testing, any combination of percutaneous (scratch, puncture, prick) and intracutaneous (intradermal), sequential and incremental, with venoms, immediate type reaction, including test interpretation and report, specify number of tests
95018	Allergy testing, any combination of percutaneous (scratch, puncture, prick) and intracutaneous (intradermal), sequential and incremental, with drugs or biologicals, immediate type reaction, including test interpretation and report, specify number of tests
95024	Intracutaneous (intradermal) tests with allergenic extracts, immediate type reaction, including test interpretation and report, specify number of tests
95027	Intracutaneous (intradermal) tests, sequential and incremental, with allergenic extracts for airborne allergens, immediate type reaction, including test interpretation and report, specify number of tests
95028	Intracutaneous (intradermal) tests with allergenic extracts, delayed type reaction, including reading, specify number of tests
95144-95149	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses)

Food Ingestion Testing CPT Codes

95076-95079	Ingestion challenge test (sequential and incremental ingestion of test items, eg, food, drug or other substance)

Food Ingestion Testing appropriate ICD-10-CM Diagnosis Codes

L27.2	Dermatitis due to ingested food
T50.995A-T50.995S	Poisoning by, adverse effect of and underdosing
T78.00XA-T78.09XS	Anaphylactic reaction due to food
T78.110A-T78.19XS	Other adverse food reactions, not elsewhere classified
Z88.0-Z88.9	Allergy status to drugs, medicaments and biological substances

Patch Testing CPT Codes

95044	Patch or application test(s) (specify number of tests)

Patch Testing appropriate ICD-10-CM Diagnosis Codes

L20.84	Intrinsic (allergic) eczema
L23.0-L23.9	Allergic contact dermatitis
L50.0	Allergic urticaria

Photo Testing CPT Codes

95052	Photo patch test(s) (specify number of tests)
95056	Photo tests

Photo Testing appropriate ICD-10-CM Diagnosis Codes

L56.1	Drug photoallergic response
L56.2	Photocontact dermatitis [berloque dermatitis]
L56.3	Solar urticaria

Rapid Desensitization CPT Code

95180	Rapid desensitization procedure, each hour (eg, insulin, penicillin, equine serum)

Rapid Desensitization appropriate ICD-10-CM Diagnosis Codes

J30.0-J30.9	Vasomotor and allergic rhinitis
S00.06XX; S00.26XX; S00.36XX; S00.46XX; S00.56XX; S00.86XX; S00.96XX; S10.16XX; S10.86XX; S10.96XX; S20.16XX; S20.36XX; S20.46XX; S20.96XX; S30.86XX; S40.26XX; S40.86XX; S50.36XX;	Insect bites

S50.86XX; S60.36XX; S60.46XX; S60.56XX; S60.86XX; S70.26XX; S70.36XX; S80.26XX; S80.86XX; S90.46XX; S90.56XX; S90.86XX;	
T36.0X1A-T50.996S	Poisoning by, adverse effect of and underdosing of drugs, medicaments and biologic substances
T63.421A-T63.484S	Toxic effect of venom of other arthropod
Z88.0 - Z88.9	Allergy status to drugs, medicaments and biological substances
Z91.030 - Z91.038	Allergy to insects

Non-Covered CPT Codes

95060	Ophthalmic mucous membrane tests
95065	Direct nasal mucous membrane test

F. Frequently Asked Questions

N/A

G. Review/Revision Date

Action	Date	Comments
Annual Review	07/07/2026	Removed L20.89, L20.9, L50.1, L50.6, L50.8, L50.9 from photo patch testing and T36.0X5A to T50.994S removed from ingestion challenge testing per CPB 0038 updates.
Review	01/07/2026	Policy template updated; Policy name changed from *Allergy Testing*- no other content changes
Effective Date	12/01/2020	

H. Resources

1. Aetna. (2026, March 10). *Allergy and hypersensitivity (*Clinical Policy Bulletin No. 0038). Aetna. https://aetnet.aetna.com/mpa/cpb/1_99/0038.html
2. American Academy of Allergy, Asthma and Immunology, *Allergen immunotherapy: A Practice Parameter*, 2010.
3. American Medical Association. *CPT Professional Edition 2026, AMA;* 2025.
4. American Medical Association. *ICD-10-CM 2026 the Complete Official Codebook, AMA;* 2025.