

Effective date: Nov. 1, 2025

Applies to:

Commercial Products

- Harvard Pilgrim Health Care Commercial products
- Tufts Health Plan Commercial products

Public Plans Products

- Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
- Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans
- Tufts Health RITogether – A Rhode Island Medicaid Plan
- Tufts Health One Care – A dual-eligible product

Senior Products

- Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
- Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy

Alzheimer disease (AD) is a neurodegenerative disease defined by a gradual decline in memory, cognitive functions, gross atrophy of the brain, and accumulation of extracellular amyloid plaques and intracellular neurofibrillary tangles.

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 “Applicable State and Federal Regulations” section of this policy document.

1. For individuals with suspected Alzheimer disease or mild cognitive impairment, measurement of amyloid beta peptides the following biomarkers in cerebrospinal fluid **MEETS COVERAGE CRITERIA.**
 - a. Amyloid beta peptides.
 - b. The ratio of total tau (t-tau) to amyloid beta 1-42 (Aβ42).
 - c. The ratio of phosphorylated tau 181 (p-tau181) to Aβ42.

- 4.2. For individuals with suspected Alzheimer disease or mild cognitive impairment, measurement of the ratio of p-tau 217 (p-tau217) to Aβ42 in plasma using an FDA-approved test (e.g., Lumipulse G pTau217/β-Amyloid 1-42 Plasma Ratio) MEETS COVERAGE CRITERIA.

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.

- 2-3. Measurement of cerebrospinal fluid biomarkers of Alzheimer disease or dementia not mentioned above (e.g., tau protein, α-synuclein, or neural thread proteins) **DOES NOT MEET COVERAGE CRITERIA.**
- 3-4. Measurement of plasma and/or serum biomarkers of Alzheimer disease or dementia (e.g., p-tau217 or Aβ42 as individual markers, total tau protein, amyloid beta peptides-1-40, neural thread proteins, ApoE, and ApoE4) **DOES NOT MEET COVERAGE CRITERIA.**
- 4-5. Measurement of urinary biomarkers of Alzheimer disease or dementia (e.g., neural thread proteins, amyloid beta peptides, and urinary extracellular vesicle analysis) **DOES NOT MEET COVERAGE CRITERIA.**
- 5-6. The use of multianalyte assays, algorithmic analysis, and/or any other tests not mentioned above for the prognosis, diagnosis, and/or management of Alzheimer disease or dementia **DOES NOT MEET COVERAGE CRITERIA**

Applicable CPT/HCPCS Procedure Codes

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

Coding

Code	Description
82233	Beta-amyloid; 1-40 (Abeta 40) (Effective for DOS beginning June 1, 2026)
82234	Beta-amyloid; 1-42 (Abeta 42) (Effective for DOS beginning June 1, 2026)
83520	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; quantitative, not otherwise specified
83884	Neurofilament light chain (NfL) (Effective for DOS beginning June 1, 2026)
84393	Tau, phosphorylated (eg, pTau 181, pTau 217), each (Effective for DOS beginning June 1, 2026)
84394	Tau, total (tTau) (Effective for DOS beginning June 1, 2026)
0206U	Neurology (Alzheimer disease); cell aggregation using morphometric imaging and protein kinase C-epsilon (PKCe) concentration in response to amylospheroid treatment by ELISA, cultured skin fibroblasts, each reported as positive or negative for Alzheimer disease Proprietary test: DISCERN™ Lab/Manufacturer: NeuroDiagnostics
0207U	Quantitative imaging of phosphorylated ERK1 and ERK2 in response to bradykinin treatment by in situ immunofluorescence, using cultured skin fibroblasts, reported as a probability index for Alzheimer disease (List separately in addition to code for primary procedure) Proprietary test: DISCERN™ Lab/Manufacturer: NeuroDiagnostics
0289U	Neurology (Alzheimer disease), mRNA, gene expression profiling by RNA sequencing of 24 genes, whole blood, algorithm reported as predictive risk score Proprietary test: MindX Blood Test™ - Memory/Alzheimer's Lab/Manufacturer: MindX Sciences™ Laboratory/MindX Sciences™ Inc
0346U	Beta amyloid, Aβ40 and Aβ42 by liquid chromatography with tandem mass spectrometry (LC-MS/MS), ratio, plasma Proprietary test: QUEST AD Detect™, Beta-Amyloid 42/40 Ratio, Plasma Lab/Manufacturer: Quest Diagnostics
0393U	Neurology (e.g., Parkinson disease, dementia with Lewy bodies), cerebrospinal fluid (CSF), detection of misfolded α-synuclein protein by seed amplification assay, qualitative Proprietary test: SYNTap® Biomarker Test Lab/Manufacturer: Amprion Clinical Laboratory
0412U	Beta amyloid, Aβ42/40 ratio, immunoprecipitation with quantitation by liquid chromatography with tandem mass spectrometry (LC-MS/MS) and qualitative ApoE isoform-specific proteotyping, plasma combined with age, algorithm reported as presence or absence of brain amyloid pathology Proprietary test: PrecivityAD® blood test Lab/Manufacturer: C2N Diagnostics LLC
0443U	Neurofilament light chain (nfl), ultra-sensitive immunoassay, serum or cerebrospinal fluid Proprietary test: Neurofilament Light Chain (NfL) Lab/Manufacturer: Neuromuscular Clinical Laboratory at Washington University in St. Louis School of Medicine, Neuromuscular Clinical Laboratory at Washington University in St. Louis School of Medicine
0445U	B-amyloid (abeta42) and phospho tau (181p) (ptau181), electrochemiluminescent immunoassay (eclia), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology
0459U	β-amyloid (Abeta42) and total tau (tTau), electrochemiluminescent immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology Proprietary test: Elecsys® Total Tau CSF (tTau) and βAmyloid (1-42) CSF II (Abeta 42) Ratio Lab/Manufacturer: Roche Diagnostics Operations, Inc (US owner/operator)
0479U	Tau, phosphorylated, pTau217 Proprietary test: ALZpath pTau217 Lab/Manufacturer: Neurocode USA, Inc, Quanterix/ALZpath
0503U	Neurology (Alzheimer disease), beta amyloid (Aβ40, Aβ42, Aβ42/40 ratio) and tau-protein (ptau217, np-tau217, ptau217/nptau217 ratio), blood, immunoprecipitation with quantitation by liquid chromatography with tandem mass spectrometry (LC-MS/MS), algorithm score reported as likelihood of positive or negative for amyloid plaques

Code	Description
	Proprietary test: PrecivityAD2™ Lab/Manufacturer: C2N Diagnostics, LLC
0547U	Neurofilament light chain (NfL), chemiluminescent enzyme immunoassay, plasma, quantitative Proprietary test: Neurofilament Light Blood Test (Effective for DOS beginning June 1, 2026) Lab/Manufacturer: Neurocode USA, Inc, Fujirebio Diagnostics, Inc.
0548U	Glial fibrillary acidic protein (GFAP), chemiluminescent enzyme immunoassay, using plasma Proprietary test: Glial Fibrillary Acidic Protein Blood Test (Effective for DOS beginning June 1, 2026) Lab/Manufacturer: Neurocode USA, Inc, Fujirebio Diagnostics, Inc.
0568U	Neurology (dementia), beta amyloid (Aβ40, Aβ42, Aβ42/40 ratio), tau-protein phosphorylated at residue (eg, pTau217), neurofilament light chain (NfL), and glial fibrillary acidic protein (GFAP), by ultra-high sensitivity molecule array detection, plasma, algorithm reported as positive, intermediate, or negative for Alzheimer pathology (Effective for DOS beginning June 1, 2026) Proprietary test: LucentAD™ Complete Lab/Manufacturer: Quanterix Corporation
0596U	Neurology (Alzheimer disease), plasma, 3 distinct isoform-specific peptides (APOE2, APOE3, and APOE4) by liquid chromatography with tandem mass spectrometry (LCMS/MS), reported as an APOE prototype (Effective for DOS beginning June 1, 2026) Proprietary test: Precivity-ApoE™ Lab/Manufacturer: C2N Diagnostics, LLC

Evidence-based Scientific References

- Karch CM, Cruchaga C, Goate AM. Alzheimer's disease genetics: from the bench to the clinic. *Neuron*. 2014;83(1):11-26. doi:10.1016/j.neuron.2014.05.041
- WHO. Dementia. <https://www.who.int/news-room/fact-sheets/detail/dementia>
- Goldman JS, Hahn SE, Catania JW, et al. Genetic counseling and testing for Alzheimer disease: Joint practice guidelines of the American College of Medical Genetics and the National Society of Genetic Counselors. *Genet Med*. 2011;13(6):597-605. doi:10.1097/GIM.0b013e31821d69b8
- Gatz M, Reynolds CA, Fratiglioni L, et al. Role of genes and environments for explaining Alzheimer disease. *Archives of general psychiatry*. 2006;63(2):168-74. doi:10.1001/archpsyc.63.2.168
- Kramarow E, Tejada-Vera B. Adjusted Death Rates* from Dementia,† by Sex, Race, and Hispanic Origin — National Vital Statistics System, United States, 2017. *MMWR Morb Mortal Wkly Rep*. 2019;68:670.
- Shea YF, Chu LW, Chan AO, Ha J, Li Y, Song YQ. A systematic review of familial Alzheimer's disease: Differences in presentation of clinical features among three mutated genes and potential ethnic differences. *Journal of the Formosan Medical Association = Taiwan yi zhi*. 2016;115(2):67-75. doi:10.1016/j.jfma.2015.08.004
- Sala Frigerio C, De Strooper B. Alzheimer's Disease Mechanisms and Emerging Roads to Novel Therapeutics. *Annual Review of Neuroscience*. 2016;39(1):57-79. doi:10.1146/annurev-neuro-070815-014015
- Van Cauwenbergh C, Van Broeckhoven C, Sleegers K. The genetic landscape of Alzheimer disease: clinical implications and perspectives. *Genet Med*. 2016;18(5):421-30. doi:10.1038/gim.2015.117
- Arranz AM, De Strooper B. The role of astroglia in Alzheimer's disease: pathophysiology and clinical implications. *Lancet Neurol*. 2019;18(4):406-414. doi:10.1016/s1474-4422(18)30490-3
- Peterson RC. Mild cognitive impairment: Prognosis and treatment. Updated June 7, 2024. <https://www.uptodate.com/contents/mild-cognitive-impairment-prognosis-and-treatment>
- Bennett DA, Wilson RS, Schneider JA, et al. Natural history of mild cognitive impairment in older persons. *Neurology*. 2002;59(2):198-205.
- Hansson O, Lehmann S, Otto M, Zetterberg H, Lewczuk P. Advantages and disadvantages of the use of the CSF Amyloid β (Aβ) 42/40 ratio in the diagnosis of Alzheimer's Disease. *Alzheimers Res Ther*. 2019;11(1):34. doi:10.1186/s13195-019-0485-0
- Wolk DA, Dickerson BC. Clinical features and diagnosis of Alzheimer disease. Updated September 30, 2024. <https://www.uptodate.com/contents/clinical-features-and-diagnosis-of-alzheimer-disease>
- Schaffer C, Sarad N, DeCrumpe A, et al. Biomarkers in the Diagnosis and Prognosis of Alzheimer's Disease. *Journal of laboratory automation*. 2015;20(5):589-600. doi:10.1177/2211068214559979
- Farrer LA, Cupples LA, Haines JL, et al. Effects of age, sex, and ethnicity on the association between apolipoprotein E genotype and Alzheimer disease. A meta-analysis. APOE and Alzheimer Disease Meta Analysis Consortium. *Jama*. 1997;278(16):1349-56.

16. Patel S, Shah RJ, Coleman P, Sabbagh M. Potential peripheral biomarkers for the diagnosis of Alzheimer's disease. *International journal of Alzheimer's disease*. 2011;2011:572495. doi:10.4061/2011/572495
17. Blennow K, Zetterberg H, Fagan AM. Fluid biomarkers in Alzheimer disease. *Cold Spring Harbor perspectives in medicine*. 2012;2(9):a006221. doi:10.1101/cshperspect.a006221
18. Lonneborg A. Biomarkers for Alzheimer disease in cerebrospinal fluid, urine, and blood. *Molecular diagnosis & therapy*. 2008;12(5):307-20.
19. Jiang L, Dong H, Cao H, Ji X, Luan S, Liu J. Exosomes in Pathogenesis, Diagnosis, and Treatment of Alzheimer's Disease. *Med Sci Monit*. 2019;25:3329-3335. doi:10.12659/msm.914027
20. Huan T, Tran T, Zheng J, et al. Metabolomics Analyses of Saliva Detect Novel Biomarkers of Alzheimer's Disease. *Journal of Alzheimer's disease : JAD*. 2018;65(4):1401-1416. doi:10.3233/jad-180711
21. François M, Bull CF, Fenech MF, Leifert WR. Current State of Saliva Biomarkers for Aging and Alzheimer's Disease. *Curr Alzheimer Res*. 2019;16(1):56-66. doi:10.2174/1567205015666181022094924
22. Morris JC, Blennow K, Froelich L, et al. Harmonized diagnostic criteria for Alzheimer's disease: recommendations. *Journal of internal medicine*. 2014;275(3):204-13. doi:10.1111/joim.12199
23. C2N. SYN-ONE TEST®. <https://c2n.com/news-releases/2019/01/29/2019-1-24-c2n-diagnostics-receives-breakthrough-device-designation-from-us-fda-for-blood-test-to-screen-for-alzheimers-disease-risk>
24. Fujirebio. Lumipulse® G β -Amyloid Ratio (1-42/1-40). <https://www.fujirebio.com/en-us/products-solutions/lumipulse-g-beta-amyloid-ratio-142-140>
25. FDA. FDA Permits Marketing for New Test to Improve Diagnosis of Alzheimer's Disease. <https://www.prnewswire.com/news-releases/fda-permits-marketing-for-new-test-to-improve-diagnosis-of-alzheimers-disease-301540093.html>
26. Roche. Roche Alzheimer's disease Cerebrospinal Fluid (CSF) assays receive FDA clearance, supporting more accurate and timely diagnosis. <https://www.globenewswire.com/news-release/2022/12/08/2569879/0/en/Roche-Alzheimer-s-disease-Cerebrospinal-Fluid-CSF-assays-receive-FDA-clearance-supporting-more-accurate-and-timely-diagnosis.html>
27. Roche. Roche receives FDA clearance for additional Alzheimer's disease Cerebrospinal Fluid (CSF) assays, supporting timely diagnosis and treatment decision-making. <https://diagnostics.roche.com/us/en/news-listing/2023/roche-fda-clearance-additional-alzheimers-disease-cerebrospinal-fluid-ttau.html>
28. BusinessWire. Quanterix Launches LucentAD Biomarker Blood Test to Aid Physician Diagnosis of Alzheimer's Disease in Patients. <https://www.businesswire.com/news/home/20230706742971/en/>
29. Alzheimer's Association. Lecanemab Approved for Treatment of Early Alzheimer's Disease. <https://www.alz.org/alzheimers-dementia/treatments/lecanemab-leqembi>
30. CND Life Sciences. SYN-ONE TEST®. <https://cndlifesciences.com/syn-one-test/>
31. Donadio V, Doppler K, Incensi A, et al. Abnormal alpha-synuclein deposits in skin nerves: intra- and inter-laboratory reproducibility. *Eur J Neurol*. 2019;26(10):1245-1251. doi:10.1111/ene.13939
32. Levine TD, Bellaire B, Gibbons C, Freeman R. Cutaneous alpha-synuclein deposition in postural tachycardia patients. *Ann Clin Transl Neurol*. 2021;8(4):908-917. doi:10.1002/acn3.51347
33. Kim JY, Illigens BM, McCormick MP, Wang N, Gibbons CH. Alpha-Synuclein in Skin Nerve Fibers as a Biomarker for Alpha-Synucleinopathies. *J Clin Neurol*. 2019;15(2):135-142. doi:10.3988/jcn.2019.15.2.135
34. Waqar S, Khan H, Zulfiqar SK, Ahmad A. Skin Biopsy as a Diagnostic Tool for Synucleinopathies. *Cureus*. 2023;15(10):e47179. doi:10.7759/cureus.47179
35. Dage JL, Wennberg AMV, Airey DC, et al. Levels of tau protein in plasma are associated with neurodegeneration and cognitive function in a population-based elderly cohort. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2016;12(12):1226-1234. doi:10.1016/j.jalz.2016.06.001
36. Lewczuk P, Matzen A, Blennow K, et al. Cerebrospinal Fluid Abeta42/40 Corresponds Better than Abeta42 to Amyloid PET in Alzheimer's Disease. *Journal of Alzheimer's disease : JAD*. 2017;55(2):813-822. doi:10.3233/jad-160722
37. Talwar P, Sinha J, Grover S, et al. Meta-analysis of apolipoprotein E levels in the cerebrospinal fluid of patients with Alzheimer's disease. *Journal of the neurological sciences*. 2016;360:179-87. doi:10.1016/j.jns.2015.12.004
38. Wang H, Stewart T, Toledo JB, et al. A Longitudinal Study of Total and Phosphorylated alpha-Synuclein with Other Biomarkers in Cerebrospinal Fluid of Alzheimer's Disease and Mild Cognitive Impairment. *Journal of Alzheimer's disease : JAD*. 2018;61(4):1541-1553. doi:10.3233/jad-171013
39. Zhang J, Zhang CH, Li RJ, et al. Accuracy of urinary AD7c-NTP for diagnosing Alzheimer's disease: a systematic review and meta-analysis. *Journal of Alzheimer's disease : JAD*. 2014;40(1):153-9. doi:10.3233/jad-131445
40. Wang S, Kojima K, Mobley JA, West AB. Proteomic analysis of urinary extracellular vesicles reveal biomarkers for neurologic disease. *EBioMedicine*. 2019;45:351-361. doi:10.1016/j.ebiom.2019.06.021
41. Liu Y, Wei M, Yue K, et al. Study on Urine Metabolic Profile of Abeta25-35-Induced Alzheimer's Disease Using UHPLC-Q-TOF-MS. *Neuroscience*. 2018;394:30-43. doi:10.1016/j.neuroscience.2018.10.001
42. Fossati S, Ramos Cejudo J, Debure L, et al. Plasma tau complements CSF tau and P-tau in the diagnosis of Alzheimer's disease. *Alzheimer's & dementia (Amsterdam, Netherlands)*. 2019;11:483-492. doi:10.1016/j.dadm.2019.05.001
43. Tatebe H, Kasai T, Ohmichi T, et al. Quantification of plasma phosphorylated tau to use as a biomarker for brain Alzheimer pathology: pilot case-control studies including patients with Alzheimer's disease and down syndrome. *Molecular neurodegeneration*. 2017;12(1):63. doi:10.1186/s13024-017-0206-8

44. Shen XN, Niu LD, Wang YJ, et al. Inflammatory markers in Alzheimer's disease and mild cognitive impairment: a meta-analysis and systematic review of 170 studies. *J Neurol Neurosurg Psychiatry*. 2019;90(5):590-598. doi:10.1136/jnnp-2018-319148
45. Palmqvist S, Janelidze S, Stomrud E, et al. Performance of Fully Automated Plasma Assays as Screening Tests for Alzheimer Disease-Related β -Amyloid Status. *JAMA Neurol*. 2019;76(9):1060-9. doi:10.1001/jamaneurol.2019.1632
46. Kim K, Kim M-J, Kim DW, Kim SY, Park S, Park CB. Clinically accurate diagnosis of Alzheimer's disease via multiplexed sensing of core biomarkers in human plasma. *Nature Communications*. 2020;11(1):119. doi:10.1038/s41467-019-13901-z
47. Simrén J, Leuzy A, Karikari TK, et al. The diagnostic and prognostic capabilities of plasma biomarkers in Alzheimer's disease. *Alzheimer's & Dementia*. 2021;17(7):1145-1156. doi:10.1002/alz.12283
48. Qu Y, Ma YH, Huang YY, et al. Blood biomarkers for the diagnosis of amnesic mild cognitive impairment and Alzheimer's disease: A systematic review and meta-analysis. *Neurosci Biobehav Rev*. 2021;128:479-486. doi:10.1016/j.neubiorev.2021.07.007
49. Chen YR, Liang CS, Chu H, et al. Diagnostic accuracy of blood biomarkers for Alzheimer's disease and amnesic mild cognitive impairment: A meta-analysis. *Ageing Res Rev*. 2021;71:101446. doi:10.1016/j.arr.2021.101446
50. Yoong SQ, Lu J, Xing H, Gyanwali B, Tan YQ, Wu XV. The prognostic utility of CSF neurogranin in predicting future cognitive decline in the Alzheimer's disease continuum: A systematic review and meta-analysis with narrative synthesis. *Ageing Res Rev*. 2021;72:101491. doi:10.1016/j.arr.2021.101491
51. Nojima H, Ito S, Kushida A, et al. Clinical utility of cerebrospinal fluid biomarkers measured by LUMIPULSE(®) system. *Ann Clin Transl Neurol*. 2022;9(12):1898-1909. doi:10.1002/acn3.51681
52. Schindler SE, Petersen KK, Saef B, et al. Head-to-head comparison of leading blood tests for Alzheimer's disease pathology. *medRxiv*. Jul 3 2024;doi:10.1101/2024.06.12.24308839
53. McKhann GM, Knopman DS, Chertkow H, et al. The diagnosis of dementia due to Alzheimer's disease: Recommendations from the National Institute on Aging-Alzheimer's Association workgroups on diagnostic guidelines for Alzheimer's disease. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2011;7(3):263-9. doi:10.1016/j.jalz.2011.03.005
54. Mattsson N, Andreasson U, Persson S, et al. The Alzheimer's Association external quality control program for cerebrospinal fluid biomarkers. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2011;7(4):386-395 e6. doi:10.1016/j.jalz.2011.05.2243
55. Cordell CB, Borson S, Boustani M, et al. Alzheimer's Association recommendations for operationalizing the detection of cognitive impairment during the Medicare Annual Wellness Visit in a primary care setting. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2013;9(2):141-50. doi:10.1016/j.jalz.2012.09.011
56. Shaw LM, Arias J, Blennow K, et al. Appropriate use criteria for lumbar puncture and cerebrospinal fluid testing in the diagnosis of Alzheimer's disease. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2018;14(11):1505-1521. doi:10.1016/j.jalz.2018.07.220
57. Hansson O, Edelmayer RM, Boxer AL, et al. The Alzheimer's Association appropriate use recommendations for blood biomarkers in Alzheimer's disease. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2022;18(12):2669-2686. doi:10.1002/alz.12756
58. Jack CR, Jr., Andrews SJ, Beach TG, et al. Revised criteria for the diagnosis and staging of Alzheimer's disease. *Nat Med*. Aug 2024;30(8):2121-2124. doi:10.1038/s41591-024-02988-7
59. Rabinovici GD, Knopman DS, Arbizu J, et al. Updated Appropriate Use Criteria for Amyloid and Tau PET: A Report from the Alzheimer's Association and Society for Nuclear Medicine and Molecular Imaging Workgroup. *J Nucl Med*. Jun 6 2025;66(Suppl 2):S5-s31. doi:10.2967/jnumed.124.268756
60. Simonsen AH, Herukka SK, Andreasen N, et al. Recommendations for CSF AD biomarkers in the diagnostic evaluation of dementia. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2017;13(3):274-284. doi:10.1016/j.jalz.2016.09.008
61. Herukka SK, Simonsen AH, Andreasen N, et al. Recommendations for cerebrospinal fluid Alzheimer's disease biomarkers in the diagnostic evaluation of mild cognitive impairment. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2017;13(3):285-295. doi:10.1016/j.jalz.2016.09.009
62. Albert MS, DeKosky ST, Dickson D, et al. The diagnosis of mild cognitive impairment due to Alzheimer's disease: recommendations from the National Institute on Aging-Alzheimer's Association workgroups on diagnostic guidelines for Alzheimer's disease. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2011;7(3):270-9. doi:10.1016/j.jalz.2011.03.008
63. Jack CR, Jr., Bennett DA, Blennow K, et al. NIA-AA Research Framework: Toward a biological definition of Alzheimer's disease. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2018;14(4):535-562. doi:10.1016/j.jalz.2018.02.018
64. WHO. Preferred product characteristics of blood-based biomarker diagnostics for Alzheimer disease. <https://www.who.int/publications/i/item/9789240099067>
65. GBSC. Biomarker Consortium. Global Biomarker Standardization Consortium (GBSC); Alzheimer's Association. https://www.alz.org/research/for_researchers/partnerships/biomarker_consortium

66. Knopman DS, DeKosky ST, Cummings JL, et al. Practice parameter: diagnosis of dementia (an evidence-based review). Report of the Quality Standards Subcommittee of the American Academy of Neurology. *Neurology*. 2001;56(9):1143-53. doi:10.1212/wnl.56.9.1143
67. McKeith IG, Boeve BF, Dickson DW, et al. Diagnosis and management of dementia with Lewy bodies: Fourth consensus report of the DLB Consortium. *Neurology*. 2017;89(1):88-100. doi:10.1212/wnl.0000000000004058
68. Lewczuk P, Riederer P, O'Bryant SE, et al. Cerebrospinal fluid and blood biomarkers for neurodegenerative dementias: An update of the Consensus of the Task Force on Biological Markers in Psychiatry of the World Federation of Societies of Biological Psychiatry. *The world journal of biological psychiatry : the official journal of the World Federation of Societies of Biological Psychiatry*. 2018;19(4):244-328. doi:10.1080/15622975.2017.1375556
69. Dubois B, Feldman HH, Jacova C, et al. Advancing research diagnostic criteria for Alzheimer's disease: the IWG-2 criteria. *Lancet Neurol*. 2014;13(6):614-29. doi:10.1016/s1474-4422(14)70090-0
70. Dubois B, Villain N, Frisoni GB, et al. Clinical diagnosis of Alzheimer's disease: recommendations of the International Working Group. *Lancet Neurol*. 2021;20(6):484-496. doi:10.1016/s1474-4422(21)00066-1
71. Owens DK, Davidson KW, Krist AH, et al. Screening for Cognitive Impairment in Older Adults: US Preventive Services Task Force Recommendation Statement. *Jama*. 2020;323(8):757-763. doi:10.1001/jama.2020.0435
72. Sorbi S, Hort J, Erkinjuntti T, et al. EFNS-ENS Guidelines on the diagnosis and management of disorders associated with dementia. *Eur J Neurol*. 2012;19(9):1159-79. doi:10.1111/j.1468-1331.2012.03784.x
73. Ismail Z, Black SE, Camicioli R, et al. Recommendations of the 5th Canadian Consensus Conference on the diagnosis and treatment of dementia. *Alzheimer's & dementia : the journal of the Alzheimer's Association*. 2020;16(8):1182-1195. doi:10.1002/alz.12105
74. NICE. Dementia: assessment, management and support for people living with dementia and their carers. <https://www.nice.org.uk/guidance/ng97/chapter/Recommendations>
75. Gottlieb S. Statement from FDA Commissioner Scott Gottlieb, M.D. on advancing the development of novel treatments for neurological conditions; part of broader effort on modernizing FDA's new drug review programs. U.S. Food and Drug Administration. <https://www.americanpharmaceuticalreview.com/1315-News/347185-Statement-from-FDA-Commissioner-on-Advancing-the-Development-of-Novel-Treatments-for-Neurological-Conditions/>
76. FDA. Early Alzheimer's Disease: Developing Drugs for Treatment. U.S. Food and Drug Administration Center for Drug Evaluation and Research Center for Biologics Evaluation and Research. <https://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM596728.pdf>
77. FDA. K242706. https://www.accessdata.fda.gov/cdrh_docs/pdf24/K242706.pdf

Publication History

- 04/01/2026: Annual policy review; administrative edits; added 82233, 82234, 83884, 84393, 84394, 0547U, 0548U, 0568U, 0596U to coding grid, effective for DOS beginning June 1, 2026
- 09/01/2025: Policy created to support coverage guidelines, effective for dates of service beginning Nov. 1, 2025

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization, and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.