Genetic testing: hereditary hearing loss

These services may or may not be covered by your HealthPartners plan. Please see your plan documents for your specific coverage information. If there is a difference between this general information and your plan documents, your plan documents will be used to determine your coverage.

Administrative Process

Prior authorization is not required for *GJB2* and *GJB6* Sequencing and/or Deletion Duplication Analysis or Multigene Panel Analysis for sensorineural hearing loss.

Prior authorization is required for all other genetic testing related to hereditary hearing loss that is associated with a procedure code listed in "Box A", below.

Box A: Genetic testing procedure codes that require prior authorization
Molecular pathology procedures, Tier 2 or unlisted (CPT 81400-81408, 81479)
Unlisted multianalyte assays (CPT 81599)
Any other listed or unlisted laboratory/pathology CPT code when it is used in association with a genetic test.

Tests that require prior authorization will be reviewed for medical necessity of the testing as a whole. That is, a single coverage decision will apply to all of the tests, services, and/or procedure codes associated with the genetic test, whether they are requested/billed together or separately.

Policy Reference Table

If available, codes are listed below for informational purposes only, and do not guarantee member coverage or provider reimbursement. The list may not be all-inclusive.

Coverage Criteria Sections	Example Tests (Labs)	Common CPT Codes	Common ICD Codes
Hereditary Hearing Loss			
GJB2 and *GJB6* Sequencing and/or Deletion Duplication Analysis or Multigene Panel Analysis	*GJB2* Gene Sequencing (GeneDx)	81252	H90.0-H90.8, H90.A-90.A3, H91.3- H91.93
	GJB2 Deletion/Duplication Analysis (GeneDx)	81479	
	GJB6 Common Variant Analysis	81254	
	GJB6 Sequencing Analysis	81479	
	Hearing Loss Panel (GeneDX)	81430, 81431	
	Comprehensive Hearing Loss NGS Panel (Sequencing & Deletion/Duplication) (Fulgent Genetics)		
	Hereditary Hearing Loss and Deafness Panel (PreventionGenetics, part of Exact Sciences)		

Coverage

GJB2 and GJB6 Sequencing and/or Deletion Duplication Analysis or Multigene Panel Analysis

1. *GJB2* sequencing and/or deletion/duplication and/or *GJB6* sequencing and/or deletion/duplication analysis or multigene panel analysis to establish a diagnosis of hereditary hearing loss is considered **medically necessary** when:
   - A. The member has hearing loss, **and**
   - B. There is no known acquired cause of the hearing loss (e.g., TORCH, bacterial infection, age-related or noise-related hearing loss).

2. *GJB2* sequencing and/or deletion/duplication and/or *GJB6* sequencing and/or deletion/duplication analysis or multigene panel analysis to establish a diagnosis of hereditary hearing loss is considered **investigational** for all other indications.

Products

This information is for most, but not all, HealthPartners plans. Please read your plan documents to see if your plan has limits or will not cover some items. If there is a difference between this general information and your plan documents, your plan documents will be used to determine your coverage. These coverage criteria do not apply to Medicare Products. For more information regarding Medicare coverage criteria or for a copy of a Medicare coverage policy, contact Member Services at 952-883-7272 or 1-877-778-8384.

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References

1. Li MM, Tayoun AA, DiStefano M, et al. Clinical evaluation and etiologic diagnosis of hearing loss: A clinical practice resource of the American College of Medical Genetics and Genomics (ACMG). *Genet Med*. 2022;24(7): 1392-1406
2. Shearer AE, Hildebrand MS, Smith RJH. Hereditary Hearing Loss and Deafness Overview. 1999 Feb 14 [Updated 2023 April 6]. In: Adam MP, Ardinger HH, Pagon RA, et al., editors. GeneReviews® [Internet]. Seattle (WA): University of Washington, Seattle; 1993-2024. Available from: https://www.ncbi.nlm.nih.gov/books/NBK1434/