

310-KK BIOMARKER TESTING

REVIEW DATE:

EFFECTIVE DATE: December 13, 2023

REFERENCES: AMPM 310-KK

PURPOSE

This policy establishes the coverage requirements of Biomarker Testing for the Division of Developmental Disabilities (Division).

DEFINITIONS

- "Biomarker" means a characteristic that is objectively measured and evaluated as an indicator of normal biological processes, pathogenic processes or pharmacologic responses to a specific therapeutic intervention which includes gene mutations or protein expression.
- 2. "Biomarker Testing" means the analysis of a patient's tissue, blood or other biospecimen for the presence of a biomarker, which includes single-analyte tests, multiplex panel tests and whole genome sequencing.
- 3. "Clinical Utility" means the test result provides information that is used in the formulation of a treatment or monitoring strategy



that informs a patient's outcome and impacts the clinical decision. The most appropriate test may include both information that is actionable and some information that cannot be immediately used in the formulation of a clinical decision.

4. "Member" means the same as "Client" as defined in A.R.S. §36-551.

POLICY

A. BIOMARKER TESTING

- The Division shall require medically necessary non-experimental Biomarker Testing is covered for the purposes of diagnosis, treatment, appropriate management, or ongoing monitoring of a Member's disease or condition to guide treatment decisions when the test provides Clinical Utility as demonstrated by the following medical and scientific evidence:
 - Labeled indications for tests that are approved or cleared by the United States Food and Drug Administration (FDA) or indicated tests for a drug that is approved by the FDA;



- Centers for Medicare and Medicaid Services (CMS) national coverage determinations or Medicare administrative
 contractor local coverage determinations, or
- c. Nationally recognized clinical practice guidelines and consensus statements as outlined in A.R.S. § 20-841.13.
- 2. The Division shall require Biomarker Testing is covered with the same scope, duration, and frequency as the system otherwise provides to Members pursuant to A.R.S. § 36-2907.03.
- 3. The Division shall require that coverage is provided in a manner that limits disruptions in care, including the need for multiple biopsies or biospecimen samples.
- The Division shall require prior authorization for Biomarker Testing.
- The Division shall require a clear and readily available process to accept electronic requests from providers for exceptions to a coverage policy.
- 6. The Division shall refer to AMPM Policy 810 for Tribal Health Plan (THP) prior authorization submission requirements.

B. Adss monitoring and oversight

- 1. The Division shall meet with the AdSS at least quarterly to:
 - a. Provide ongoing evaluation including data analysis and recommendations to refine processes; and
 - Identify successful interventions and care pathways to optimize results.
- 2. The Division shall perform an Operational Review of the AdSS on an annual basis that includes review of compliance.

Signature of Chief Medical Officer: Anthony Dekker (Dec 7, 2023 10:17 MST)

Anthony Dekker, D.O.