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Blue Cross and Blue Shield Association

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No Authorization Required for Qualified Members Prescribed Cologuard[®]

Important: We want to make sure you understand that when prescribing Cologuard, a non-invasive at-home colon cancer screening test, there's no authorization required for eligible members. Eligible members include Medicare Advantage members and other non-Medicare plan members 50-75 years of age in whom colorectal cancer preventive screening is indicated. Members who are eligible for this screening test will receive their benefit under preventive services, which is available at no cost to them – as long as this is billed with the appropriate preventive diagnosis codes which for Medicare Advantage members includes ICD-10 Z12.11 and Z12.12; for non-Medicare members, CPT 81528. The medical coverage guideline related to Cologuard is located at <http://mcgs.bcbsfl.com/>.

Cologuard is intended for the qualitative detection of colorectal neoplasia-associated DNA markers and for the presence of occult hemoglobin in human stool. The test provides for a 3-year testing schedule (compared to 1-year for FOBT kits). Health care professionals are encouraged to discuss this screening option with patients as part of a regular wellness appointment.

For ordering instructions and other details, please refer to the Cologuard FAQs [here](#).