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Developed By: Medical Criteria Committee	

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Approved: Csaba Mera, MD Date: 5/19/08

Description:

The RAST (Radioallergosorbent test) is a laboratory test performed on blood to measure the levels of allergy antibody, or IgE, produced when blood is mixed with a series of allergens in a laboratory. IgE antibodies are present in the blood only if there is true allergic reaction. The RAST is a method of demonstrating allergic reactions and should only be performed on patients who cannot undergo skin testing or when skin test results are uncertain.

Criteria:

RAST, MAST, PRIST, RIST, FAST, VAST, ELISA, ImmunoCap (or other modifications of RAST) will be covered to plan limitations when percutaneous testing of IgE-mediated allergies cannot be done for inhaled or food allergies due to **ONE** of the following conditions:

1. Children under the age of 5; or
2. Pregnant women; or
3. Patients with severe dermatographism or widespread skin disease (i.e., psoriasis, generalized eczema, widespread dermatitis, etc.); or
4. Inability to discontinue medications (i.e., antihistamines, tricyclic antidepressants) that impair skin test sensitivity; or
5. Clinical history suggests significant risk of anaphylaxis from skin testing; or
6. Results of direct skin testing are inconclusive; or
7. Uncooperative patient with mental or physical impairments

Note: ODS will not cover IgG RAST allergy testing as there is no evidence that IgG antibodies are responsible for delayed allergic symptoms or intolerance to foods. (CPT 86001)

CPT codes for RAST or modifications of RAST testing may include: 82785, 86003, 86005.

Information to be Submitted with Pre-Authorization Request:

1. History and physical from treating physician
2. Results of prior allergy testing

References:

- Atkins D, Leung D. Diagnosis of allergic disease. Chapter 131 Nelson Textbook of Pediatrics, 17th edition, Elsevier 2004.
- Radioallergosorbent Test (RAST) Methods for Allergen-Specific Immunoglobulin E (IgE) 510(k)s; Final Guidance for Industry and FDA. Issued August 22, 2001; US Food and Drug Administration.
- Li JT, Allergy testing. American Family Physician. August 15, 2002.
- Ownby DR. Allergy testing: in vivo versus in vitro. Pediatr Clin North Am. 1988 Oct; 35(5):995-1009.
- Blaiss M. Best practice of medicine-allergic reactions. Patient guide. March 2002.
- Emanuel IA. In vitro testing for allergy diagnosis. Otolaryngol Clin North Am. 2003 Oct;36(5):879-893.
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