### MEDICAL PRE-AUTHORIZATION CRITERIA

**MEDICARE**

**PROCEDURE/ Equipment**

<table>
<thead>
<tr>
<th>Genetic Testing, RET Gene – Familial Medullary Thyroid Carcinoma; Multiple Endocrine Neoplasia Type 2; MEN2 (RET gene testing)</th>
</tr>
</thead>
</table>

**CPT/HCPCS Codes**

| 81404, 81405, 81406 |

**CRITERIA**

**MUST MEET ALL OF THE FOLLOWING:**

1. Results of genetic testing will directly impact treatment received by individual.

2. One or more of the following is present:
   a. The individual has a family member with defined RET gene mutations;¹
   b. There is a family history of inherited medullary thyroid carcinoma or pheochromocytoma, but the affected individual(s) have not been evaluated for RET mutations;
   c. The individual has sporadic medullary thyroid carcinoma.

¹ The RET gene is the only gene known to be associated with Multiple Endocrine Neoplasia, Type 2 (MEN 2). MEN2 is divided into three subtypes: MEN 2A, MEN 2B, and familial medullary thyroid carcinoma (FMTC).

**REFERENCES**

There is no LCD or NCD on this topic. Therefore, the following resources were used to develop the guidelines


## Procedure/Equipment

| Procedure/Equipment | Genetic Testing, RET Gene – Familial Medullary Thyroid Carcinoma; Multiple Endocrine Neoplasia Type 2; MEN2 (RET gene testing) |

## References (continued)


## Review History

| 04/09/08, 04/15/09, 4/21/10, 11/09/11, 12/05/12, 12/03/14, 12/09/15 |