Fecal Occult Blood Test (82272) – NCD 190.34

Indications:
1. To evaluate known or suspected alimentary tract conditions that might cause bleeding into the intestinal tract.
2. To evaluate unexpected anemia.
3. To evaluate abnormal signs, symptoms, or complaints that might be associated with loss of blood.
4. To evaluate patient complaints of black or red-tinged stools.

Limitations:
1. The FOBT is reported once for the testing of up to three separate specimens (comprising either one or two tests per specimen).
2. In patients who are taking non-steroidal anti-inflammatory drugs and have a history of gastrointestinal bleeding, but no other signs, symptoms, or complaints associated with gastrointestinal blood loss, testing for occult blood may generally be appropriate no more than once every three months.
When testing is done for the purpose of screening for colorectal cancer in the absence of signs, symptoms, conditions, or complaints associated with gastrointestinal blood loss, report the HCPCS code for colorectal cancer screening; fecal-occult blood test, 1-3 simultaneous determinations should be used.

Most Common Diagnoses (which meet medical necessity) *	
D50.9	Iron deficiency anemia
D62	Acute posthemorrhagic anemia
D63.1	Anemia in chronic kidney disease
D64.9	Anemia
K21.9	Gastro-esophageal reflux disease without esophagitis
K29.70	Gastritis
K52.9	Gastroenteritis
K57.30	Diverticulosis of large intestine
K59.00	Constipation
K62.5	Hemorrhage of anus and rectum
K92.1	Melena
K92.2	Gastrointestinal hemorrhage
R10.9	Abdominal pain
R13.10	Dysphagia
R19.5	Other fecal abnormalities
R19.7	Diarrhea
Z79.01	Long term (current) use of anticoagulants
Z79.1	Long term (current) use of non-steroidal anti-inflammatories (NSAID)
Z79.82	Long term (current) use of aspirin
Z79.899	Other long term (current) drug therapy
Z86.0100	History of colon polyps

*For the full list of diagnoses that meet medical necessity see the Fecal Occult Blood National Coverage Determination 190.34 document.
The above CMS and WPS-GHA guidelines are current as of: 04/01/2025.