Blue Cross Blue Shield of Oklahoma

General inflammation testing

DIAGNOSTIC LABORATORY OF OKLAHOMA

Policy number:CPCPLAB0049 Version 1.0 | Plan Effective Date: November 7, 2025

CPT® Codes: 85651, 85652, 86140, 86141

Reimbursement Information:

Note 1: For policy regarding the use of C-reactive protein (CRP) as a cardiac biomarker, please see policy CPCPLAB046 Biomarkers for Myocardial Infarction and Chronic Heart Failure.

For policy regarding the use of C-reactive protein (CRP) as a marker for acute pancreatitis, please see policy CPCPLAB047 Pancreatic Enzyme Testing for Acute Pancreatitis.

1. Measurement of C-reactive protein (CRP) and/or erythrocyte sedimentation rate (ESR) may be reimbursable for the conditions noted in Table 1 below.
2. For individuals without a diagnosed inflammatory condition, measurement of erythrocyte sedimentation rate (ESR) is not reimbursable.
3. Measurement of CRP and/or ESR during general exam without abnormal findings is not reimbursable.

Table 1: Coverage of CRP, ESR, CRP or ESR, or both CRP and ESR is designated based on the diagnosed or suspected inflammatory condition. Either conventional or high-sensitivity CRP testing are allowed methods of testing for CRP levels. When either CRP or ESR are allowed, CRP is the preferred biomarker. If CRP and ESR are ordered at the same time for a condition where CRP or ESR are allowed, only CRP will be allowed.

Condition	Test Preference	Frequency of Testing
Acute and Chronic Urticaria	CRP or ESR	NS
Acute Hematogenous Osteomyelitis (AHO)	CRP	To confirm diagnosis; 2 to 3 days during the early therapeutic course; weekly until normalization (or a clear trend toward normalization is evident)
Acute Phase Inflammation	CRP	NS
Ankylosing Spondylitis	CRP or ESR	Regular interval use in patients with active symptoms
Arthritis	CRP and ESR	1-3 months initially; 6-12 months later
Castleman's Disease	CRP or ESR	NS
General Inflammation	CRP	NS
Hodgkin Lymphoma	ESR	Every 3 to 6 months for 1 to 2 years; every 6 to 12 months for the next 3 years; annually thereafter
Irritable Bowel Syndrome	CRP and ESR	During initial assessment to exclude other diagnoses (eg, inflammatory bowel disease)

Disclaimer: This associated condition reference guide is provided as an aid to physicians and office staff in determining when testing is medically necessary.
The diagnosis must be applicable to the patient's symptoms or conditions and must be consistent with documentation in the patient's medical record. DLO/Quest Diagnostics does not recommend any diagnosis codes or conditions and will only submit diagnosis information provided to us by the ordering physician or his/her designated staff. The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.

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Condition	Test Preference	Frequency of Testing
Large Vessel Vasculitis (Giant Cell Arteritis, Takayasu Arteritis)	CRP and ESR	To confirm diagnosis; every 1-3 months during the first year; every 3-6 months thereafter
Non-radiographic axial spondyloarthritis	CRP or ESR	Regular interval use in patients with active symptoms
Polymyalgia Rheumatica	CRP or ESR	At initial diagnosis; every 3 months during long-term steroid therapy
Periprosthetic Joint Infections (PJI)	CRP and ESR	NS
Rheumatoid Arthritis	CRP or ESR	Prior to treatment; every 1-3 months during active disease; annually when disease is inactive
Systemic Lupus Erythematosus	CRP or ESR	At initial assessment; every 1-3 months during active disease; every 6-12 months during stable disease; during pregnancy
T-cell lymphomas	ESR	NS

Last updated: 7/16/2026

To view the complete policy referenced, please refer to the Blue Cross Blue Shield of Oklahoma policy document located at the following web address:
https://www.bcbsok.com/docs/provider/ok/standards/cpcp/avalon/cpcplab049-11-7-2025.pdf

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