Effective Date: 03/24/2026

Nevada Health Solutions LLC

NHS MEDICAL POLICY

MINIMAL RESIDUAL DISEASE (MRD) TESTING
Procedure 2026-001

Minimal residual disease (MRD) analysis for solid tumors using cell free DNA with sufficient evidence of clinical utility and validity may be considered medically necessary when:

1	The identification of recurrent, refractory or progressive disease will require a change in management AND
2	The member is not undergoing concurrent molecular laboratory testing or surveillance or monitoring for recurrent, refractory or progressive disease AND
3	The member meets one of the following: • The member is currently being treated for cancer AND • The test has not previously been done for this cancer diagnosis OR • There is a clinical suspicion that the molecular profile of the member's tumor has changed OR • The members are not currently being treated for their cancer AND • There is a clinical suspicion for tumor recurrence AND
4	The members meet one (1) of the following: • The member is being tested via Guardant360 Response or Guardant Reveal and has one of the following: • Metastatic colon cancer, OR • Colon cancer at any stage, and • The member is being monitored for response to immune checkpoint inhibitor therapy OR • The member is being tested with Signatera and has one of the following: • Metastatic colon cancer OR • Muscle invasive bladder cancer OR • Metastatic breast cancer OR • Any tumor, AND • The member is being monitored for response to immune checkpoint inhibitor therapy (e.g. pembrolizumab [Keytruda]. [ipilimimab [Yervoy], nivilumab [Opdivo])

5	Frequency of testing does not exceed recommendations for monitoring noted in National Comprehensive Cancer Network (NCCN) guidelines for RECIST (Response Evaluation Criteria in Solid Tumors) for any of the following: • Initial testing within 4-6 weeks after surgery as a baseline and for adjuvant therapy decisions • Every 3-6 months for the first 2 years initially or with recurrence or progression (not to exceed 4 tests/year) • Every 6-12 months for the following 3 years (not to exceed 2 tests/year) for colorectal cancer (CRC), NSCLC (Non-Small Lung Cancer) • Annually for following 5 years (not to exceed 1 test/year) • As indicated thereafter, based on clinicopathologic features.

SOURCES

1. Blue Shield of California Medical Policy: Tumor-Confirmed Circulating Tumor DNA for Cancer Management Policy 2.0 Medicine Effective date: March 1, 2023

2. Blue Shield of California Medical Policy: Oncology: Molecular Analysis of Solid Tumors and Hematologic Malignancies; 2.0 Medicine. Page 13 Effective Date: May 1, 2025.

2. Center for Medicare & Medicaid Services, Medicare Coverage Database: Local Coverage Determination MoIDX: Minimal Residual Disease Testing (L38779). Available at: https://www.cms.gov/medicare-coverage - database/view/lcd.aspx?lcdid=38779.

CODE REFERENCE (This may not be a comprehensive list of codes to apply to this policy.)

0340U

POLICY HISTORY/REVISION INFORMATION

Date	Action/Description