



If a conflict arises between a Clinical Payment and Coding Policy and any plan document under which a member is entitled to Covered Services, the plan document will govern. If a conflict arises between a CPCP and any provider contract pursuant to which a provider participates in and/or provides Covered Services to eligible member(s) and/or plans, the provider contract will govern. "Plan documents" include, but are not limited to, Certificates of Health Care Benefits, benefit booklets, Summary Plan Descriptions, and other coverage documents. Blue Cross and Blue Shield of Oklahoma may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSOK has full and final discretionary authority for their interpretation and application to the extent provided under any applicable plan documents.

Providers are responsible for submission of accurate documentation of services performed. Providers are expected to submit claims for services rendered using valid code combinations from Health Insurance Portability and Accountability Act approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing Editor, American Medical Association, Current Procedural Terminology, CPT® Assistant, Healthcare Common Procedure Coding System, ICD-10 CM and PCS, National Drug Codes, Diagnosis Related Group guidelines, Centers for Medicare and Medicaid Services National Correct Coding Initiative Policy Manual, CCI table edits and other CMS guidelines.

Claims are subject to the code edit protocols for services/procedures billed. Claim submissions are subject to claim review including but not limited to, any terms of benefit coverage, provider contract language, medical policies, clinical payment and coding policies as well as coding software logic. Upon request, the provider is urged to submit any additional documentation.

Immunohistochemistry

Policy Number: CPCPLAB069

Version 1.0

Approval Date: Jan. 12, 2026

Plan Effective Date: May 1, 2026

Description

The Plan has implemented certain lab management reimbursement criteria. Not all requirements apply to each product. Providers are urged to review Plan documents for eligible coverage for services rendered.

Reimbursement Information:

1. Code 88342 should be used for the first single antibody procedure and is reimbursed at one unit per specimen, up to four specimens, per date of service.
2. Code 88341 should be used for each additional single antibody per specimen and is reimbursed up to a maximum of 13 units per date of service.
3. Code 88344 should be used for each multiplex antibody per specimen, up to six specimens, per date of service.

Procedure Codes

The following is not an all-encompassing code list. The inclusion of a code does not guarantee that it is a covered service or eligible for reimbursement.

| Codes |
|---------------------|
| 88341, 88342, 88344 |

References:

1. Fitzgibbons PL, Bradley LA, Fatheree LA, et al. Principles of analytic validation of immunohistochemical assays: Guideline from the College of American Pathologists Pathology and Laboratory Quality Center. *Archives of pathology & laboratory medicine*. Nov 2014;138(11):1432-43. doi:10.5858/arpa.2013-0610-CP
2. Tuffaha MSA, Guski H, Kristiansen G. Immunohistochemistry in Tumor Diagnostics. *Immunohistochemistry in Tumor Diagnostics*. 2018// 2018:1-9. doi:10.1007/978-3-319-53577-7_1
3. Lin F, Chen Z. Standardization of diagnostic immunohistochemistry: literature review and geisinger experience. *Archives of pathology & laboratory medicine*. Dec 2014;138(12):1564-77. doi:10.5858/arpa.2014-0074-RA
4. Kalra J, Baker J. Multiplex Immunohistochemistry for Mapping the Tumor Microenvironment. *Methods Mol Biol*. 2017;1554:237-251. doi:10.1007/978-1-4939-6759-9_17
5. Hofman P, Badoual C, Henderson F, et al. Multiplexed Immunohistochemistry for Molecular and Immune Profiling in Lung Cancer-Just About Ready for Prime-Time? *Cancers (Basel)*. Feb 27 2019;11(3)doi:10.3390/cancers11030283

6. Shah AA, Frierson HF, Cathro HP. Analysis of Immunohistochemical Stain Usage in Different Pathology Practice Settings. 2012-12-01 2012;doi:10.1309/AJCPAGVTCKDXKK0X
7. Hainsworth J, Greco F. Overview of the classification and management of cancers of unknown primary site. Updated March 24, 2025. <https://www.uptodate.com/contents/overview-of-the-classification-and-management-of-cancers-of-unknown-primary-site>
8. Yamauchi H, Bleiweiss I. HER2 and predicting response to therapy in breast cancer. Updated July 31, 2025. <https://www.uptodate.com/contents/her2-and-predicting-response-to-therapy-in-breast-cancer>
9. Yamamoto H, Nozaki Y, Kohashi K, Kinoshita I, Oda Y. Diagnostic utility of pan-Trk immunohistochemistry for inflammatory myofibroblastic tumors. *Histopathology*. Oct 3 2019;doi:10.1111/his.14010
10. Lizotte PH, Ivanova EV, Awad MM, et al. Multiparametric profiling of non-small-cell lung cancers reveals distinct immunophenotypes. *JCI insight*. Sep 8 2016;1(14):e89014. doi:10.1172/jci.insight.89014
11. Prok AL, Prayson RA. Thyroid transcription factor-1 staining is useful in identifying brain metastases of pulmonary origin. *Annals of Diagnostic Pathology*. 2006/04/01 / 2006;10(2):67-71. doi:10.1016/j.anndiagpath.2005.07.013
12. Le Stang N, Burke L, Blaizot G, et al. Differential Diagnosis of Epithelioid Malignant Mesothelioma With Lung and Breast Pleural Metastasis: A Systematic Review Compared With a Standardized Panel of Antibodies-A New Proposal That May Influence Pathologic Practice. *Archives of pathology & laboratory medicine*. Aug 7 2019;doi:10.5858/arpa.2018-0457-OA
13. Lin F, Liu H. Immunohistochemistry in undifferentiated neoplasm/tumor of uncertain origin. *Archives of pathology & laboratory medicine*. Dec 2014;138(12):1583-610. doi:10.5858/arpa.2014-0061-RA
14. Goldsmith JD, Troxell ML, Roy-Chowdhuri S, et al. Principles of Analytic Validation of Immunohistochemical Assays: Guideline Update. *Archives of pathology & laboratory medicine*. 2024;148(6):e111-e153. doi:10.5858/arpa.2023-0483-CP
15. Wolff AC, Hammond ME, Hicks DG, et al. Recommendations for human epidermal growth factor receptor 2 testing in breast cancer: American Society of Clinical Oncology/College of American Pathologists clinical practice guideline update. *Journal of clinical oncology : official journal of the American Society of Clinical Oncology*. Nov 1 2013;31(31):3997-4013. doi:10.1200/jco.2013.50.9984
16. Wolff AC, Hammond MEH, Allison KH, et al. Human Epidermal Growth Factor Receptor 2 Testing in Breast Cancer: American Society of Clinical Oncology/College of American Pathologists Clinical Practice Guideline Focused Update. *Journal of clinical oncology : official journal of the American Society of Clinical Oncology*. Jul 10 2018;36(20):2105-2122. doi:10.1200/jco.2018.77.8738
17. Wolff AC, Somerfield MR, Dowsett M, et al. Human Epidermal Growth Factor Receptor 2 Testing in Breast Cancer: ASCO-College of American Pathologists Guideline Update. *Journal of Clinical Oncology*. 2023/08/01 2023;41(22):3867-3872. doi:10.1200/JCO.22.02864
18. NCCN. NCCN Guidelines Version 4.2025 Breast Cancer. Updated October 16, 2025. https://www.nccn.org/professionals/physician_gls/pdf/breast.pdf

19. NCCN. NCCN Clinical Practice Guidelines in Oncology: Genetic/Familial High-Risk Assessment: Colorectal Version 1.2025. Updated June 13, 2025.
https://www.nccn.org/professionals/physician_gls/pdf/genetics_colon.pdf

20. Krämer A, Bochtler T, Pauli C, et al. Cancer of unknown primary: ESMO Clinical Practice Guideline for diagnosis, treatment and follow-up. *Ann Oncol*. Mar 2023;34(3):228-246. doi:10.1016/j.annonc.2022.11.013

21. Khouri JD, Wang WL, Prieto VG, et al. Validation of Immunohistochemical Assays for Integral Biomarkers in the NCI-MATCH EAY131 Clinical Trial. *Clin Cancer Res*. Feb 1 2018;24(3):521-531. doi:10.1158/1078-0432.Ccr-17-1597

Policy Update History:

| Approval Date | Effective Date; Summary of Changes |
|----------------------|---|
| 01/12/2026 | 05/01/2026; Document updated with literature review. Reimbursement Information unchanged. References revised. |
| 01/23/2025 | 04/15/2025; Document updated with literature review. Reimbursement Information unchanged. References revised. |
| 03/15/2024 | Document updated with literature review. Reimbursement information unchanged. References revised; some added; others removed. |
| 06/15/2023 | Document updated with literature review. Reimbursement information unchanged. References revised; some added, others removed. |
| 11/01/2022 | New policy |