

Corporate Medical Policy

Idiopathic Environmental Intolerance (i.e. Clinical Ecology)

File Name:	idiopathic_environmental_intolerance_ie_clinical_ecology
Origination:	11/1998
Last CAP Review:	7/2004
Next CAP Review:	11/2012
Last Review:	4/2012

Description of Procedure or Service

Idiopathic environmental intolerance is typically characterized by recurrent, nonspecific symptoms that the patient believes are provoked by low levels of exposure to chemical, biologic, or physical agents. Reported symptoms are wide-ranging, and there are no clearly established diagnostic criteria. Various tests, e.g., nutritional assessment and treatment, e.g., immune globulin therapy (IVIg), have been proposed.

Idiopathic environment illness has been labeled in a variety of ways over time. The original term, clinical ecology, was replaced by the term multiple chemical sensitivity (MCS). Most recently, it has been replaced by idiopathic environmental illness, a term that reflects the uncertain nature of the condition and its relationship to chemical exposure. The condition has had other names such as environmentally induced disease, chemical hypersensitivity syndrome, cerebral allergy, total allergy syndrome, twentieth century disease. These terms describe an acquired condition whereby an individual typically describes multiple symptoms, which they attribute to numerous and varied environmental chemical exposures. The most common environmental exposures include perfumes and scented products, pesticides, domestic and industrial solvents, new carpets, car exhaust, gasoline and diesel fumes, urban air pollution, cigarette smoke, plastics, etc. (the list of specific items is virtually unlimited). In many patients symptoms may also be triggered by certain foods, food additives, foods that may have been treated with herbicides and pesticides, etc. Symptoms occur at doses far below the levels normally considered safe.

Reported symptoms are markedly variable, but generally involve either the central nervous system, respiratory and mucosal irritation, or gastrointestinal symptoms. Symptoms may include fatigue, difficulty in concentrating, depressed mood, memory loss, weakness, dizziness, headaches, heat intolerance, and arthralgia. In contrast to the frequently debilitating symptomatology, no specific and consistent abnormalities are noted on laboratory or other diagnostic testing. Other primarily subjectively defined disorders have symptoms that overlap with idiopathic environmental intolerance, including chronic fatigue syndrome, sick building syndrome, fibromyalgia, irritable bowel syndrome, and Gulf War syndrome. A diagnosis of intestinal dysbiosis could be considered within the category of idiopathic environmental intolerance.

Various causes for idiopathic environmental intolerances have been proposed; these have prompted different diagnostic and treatment approaches. An unrecognized form of allergy or immunologic hypersensitivity is a commonly proposed cause. Advocates of this etiology may recommend a large series of immunologic tests, including a variety of provocation-neutralization tests and a panel of immunologic tests, including immune function tests (e.g., deregulation of the 2,5A RNase L antiviral pathway in peripheral mononuclear blood cells) and levels of lymphocyte subsets (i.e., natural killer cells, CD8 cells). Proposed therapies have included avoidance of exposure, either or

Idiopathic Environmental Intolerance (i.e. Clinical Ecology)

both in the environment or in the diet. Immune globulin may be recommended for injection or sublingual drops of “neutralizing” chemical and food extracts. Others have proposed that exposure to toxic substances may have prompted the immunologic abnormality and, based on this theory, testing of levels of environmental chemicals in the blood, urine, or fat may be suggested. Detailed nutritional analyses have also been performed, including levels of trace minerals in the blood, urine, or intracellular levels. Such elaborate nutritional assessments may also be performed in asymptomatic subjects.

In some instances, symptoms may appear to coincide after exposure to a viral illness (particularly common in the related condition of chronic fatigue syndrome); supporters of this theory may recommend a wide variety of tests to detect antibodies or antigens of various viruses. Some have also suggested that hypersensitivity to Candida may present with a similar array of subjective complaints and thus recommend testing for Candida in the stool or urine. Finally, it has also been proposed that idiopathic environmental intolerance is a manifestation of a psychiatric disease or personality disorder based in part on results of psychological/psychiatric interviews.

It should be noted that some environmentally caused illnesses can be well characterized by their clinical presentation and laboratory tests. For example, in certain instances, “sick building” syndrome can be traced back to exposure of microorganisms related to air-handling systems. However, in contrast to idiopathic environmental intolerances, these patients experience a limited range of symptoms, and those symptoms only occur in the affected building.

See separate BCBSNC Corporate Medical Policies titled “Fecal Analysis in the Diagnosis of Intestinal Dysbiosis” and “Intracellular Micronutrient Analysis.”

******Note: This Medical Policy is complex and technical. For questions concerning the technical language and/or specific clinical indications for its use, please consult your physician.***

Policy

The diagnosis and management of Idiopathic Environmental Intolerance is considered investigational. BCBSNC does not cover investigational services.

Benefits Application

This medical policy relates only to the services or supplies described herein. Please refer to the Member's Benefit Booklet for availability of benefits. Member's benefits may vary according to benefit design; therefore member benefit language should be reviewed before applying the terms of this medical policy.

When Idiopathic Environmental Intolerance services are covered

Not Applicable

When Idiopathic Environmental Intolerance services are not covered

Laboratory tests designed to affirm the diagnosis of idiopathic environmental illness are considered investigational.

Nutritional assessments, including intracellular analysis of micronutrients, are considered investigational in both asymptomatic and patients with symptoms suggestive of idiopathic environmental illness.

Idiopathic Environmental Intolerance (i.e. Clinical Ecology)

Treatment of idiopathic environmental illness with IVIg, neutralizing therapy of chemical and food extracts, avoidance therapy, elimination diets, and oral nystatin (to treat Candida) is considered investigational.

Policy Guidelines

The clinical entity of idiopathic environmental illness has been controversial for decades, in part due to the lack of a set of reproducible diagnostic criteria. Absent a clear definition of the disorder, basic science research into the etiology of the disorder, appropriate laboratory tests, and identifications of effective treatment are obviously problematic.

Further research is required to clarify diagnostic criteria and treatment strategies surrounding idiopathic environmental intolerance. Case controlled or randomized studies with sufficient numbers and patient composition to draw meaningful conclusions are needed to validate the proposed diagnostic methods and to determine the safety, efficacy, effectiveness and efficiency of therapies aimed at treating idiopathic environmental illness.

Billing/Coding/Physician Documentation Information

This policy may apply to the following codes. Inclusion of a code in this section does not guarantee that it will be reimbursed. For further information on reimbursement guidelines, please see Administrative Policies on the Blue Cross Blue Shield of North Carolina web site at www.bcbsnc.com. They are listed in the Category Search on the Medical Policy search page.

Applicable service codes: A wide variety of laboratory and other diagnostic tests may be used, but there is no specific code.

BCBSNC may request medical records for determination of medical necessity. When medical records are requested, letters of support and/or explanation are often useful, but are not sufficient documentation unless all specific information needed to make a medical necessity determination is included.

Scientific Background and Reference Sources

BCBSA Medical Policy Reference Manual - 12/95

MEDLINE database search from 1/97 through 7/97

MEDLINE database search from 7/97 through 7/1/99

Medical Policy Advisory Group - 9/14/2000

Specialty Matched Consultant Advisory Panel - 7/2002

Middleton: Allergy: Principles and Practice 5th Edition; Pages 1236-1239

American Academy of Allergy, Asthma & Immunology, Media Resources: Position Statement; Idiopathic environmental intolerances, AAAAI Board of Directors, Jan. 1999; assessed on 3/27/2012 at http://aaaai.org/media/resources/academy_statements/position_statements/ps35.asp

BCBSA Medical Policy Reference Manual, 2.01.01; 2/25/04

Idiopathic Environmental Intolerance (i.e. Clinical Ecology)

Specialty Matched Consultant Advisory Panel - 7/2004

BCBSA Medical Policy Reference Manual [Electronic Version]. 2.01.01, 3/15/05.

BCBSA Medical Policy Reference Manual [Electronic Version]. 2.01.01, 12/14/05

BCBSA Medical Policy Reference Manual [Electronic Version]. 2.01.01, 5/12/11

Policy Implementation/Update Information

8/83 Original policy

6/96 Reviewed: National Association reviewed 12/95. No changes.

7/97 Reaffirmed: No changes

10/99 Archived

6/00 Reactivated due to investigational status of services.

7/00 System coding changes

9/00 Medical Policy Advisory Group. Approve. No change in criteria.

See Also: Allergy Testing, UMP Medicine Section, p. 95004.MED, Allergy Immunotherapy, UMP Medicine Section, p. 95115.MED.

11/01 Coding format change.

11/01 Revised coding format change.

7/02 Specialty Matched Consultant Advisory Panel review. No changes to criteria. Description section revised for clarity.

3/04 Benefits Application and Billing/Coding sections updated for consistency.

8/26/04 Specialty Matched Consultant Advisory Panel review. Name of policy changed from "Clinical Ecology" to "Diagnosis and Management of Idiopathic Environmental Intolerance (i.e., Clinical Ecology)". Description section revised to reflect evolving terminology, expanded discussion, etc. Removed code 95199 as it is designated for reporting "unlisted procedures".

9/9/04 Name of policy changed from "Diagnosis and Management of Idiopathic Environmental Intolerance (i.e., Clinical Ecology)" to "Idiopathic Environmental Intolerance (i.e., Clinical Ecology)" due to character number limitations.

7/24/06 Reference sources and key words added. Policy status changed to "Active policy, no longer scheduled for routine literature review." (pmo)

6/22/10 Policy Number(s) removed (amw)

5/1/12 Policy status changed to active and will receive annual review. Description section updated. Policy Statement revised to state: "The diagnosis and management of Idiopathic Environmental Intolerance is considered investigational. BCBSNC does not cover investigational services." Policy Guidelines updated. References updated. Medical Director review 4/2012. (mco)

Idiopathic Environmental Intolerance (i.e. Clinical Ecology)

Medical policy is not an authorization, certification, explanation of benefits or a contract. Benefits and eligibility are determined before medical guidelines and payment guidelines are applied. Benefits are determined by the group contract and subscriber certificate that is in effect at the time services are rendered. This document is solely provided for informational purposes only and is based on research of current medical literature and review of common medical practices in the treatment and diagnosis of disease. Medical practices and knowledge are constantly changing and BCBSNC reserves the right to review and revise its medical policies periodically.