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Reviewed: 06/26/25

Revised: 07/15/25

Subject: High Resolution Anoscopy

THIS MEDICAL COVERAGE GUIDELINE IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, OR A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS MEDICAL COVERAGE GUIDELINE APPLIES TO ALL LINES OF BUSINESS UNLESS OTHERWISE NOTED IN THE PROGRAM EXCEPTIONS SECTION.

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DESCRIPTION:

High resolution anoscopy (HRA), also known as colposcopy of the anal canal, is a procedure which allows for examination and evaluation of the anal canal using an anoscope and a high resolution (10 - 40x magnification) colposcope. The anal canal is examined following the application of a mild acidic liquid that aides in the identification of abnormal tissue such as anal dysplasia. If suspicious lesions are found, biopsies are obtained for microscopic examination.

Summary and Analysis of Evidence: The National Comprehensive Cancer Network (NCCN) 2025 Anal Carcinoma Clinical Practice Guidelines in Oncology includes: "High-grade anal intraepithelial neoplasia [AIN] can be a precursor to anal cancer. AIN can be identified by cytology, HPV testing, digital anorectal examination (DRE/DARE), high-resolution anoscopy, and biopsy." The recommendations in the American Society of Colon and Rectal Surgeons Clinical Practice Guidelines for Anal Squamous Cell Cancers (2018) include: "Ablative treatments with conventional anoscopy or HRA are appropriate therapies for high-grade intraepithelial lesions [HSILs]". An UpToDate article titled, Anal squamous intraepithelial lesions: Epidemiology, clinical presentation, diagnosis, screening, prevention, and treatment (2023) states "An abnormal anal cytology screening test should be followed by HRA for a diagnostic biopsy." There is limited data found to support the use of high resolution anoscopy for other indications or as a screening test for anal dysplasia and anal cancer. The evidence is insufficient to determine the effects of the technology on health outcomes.

POSITION STATEMENT:

High resolution anoscopy **meets the definition of medical necessity** when used in the diagnosis of a suspicious anal lesion (including a high-grade suspicious intraepithelial lesion) OR anal dysplasia found in prior cytology/biopsy.

High resolution anoscopy is considered **experimental or investigational** for all other indications and when used as a screening test for anal dysplasia and anal cancer. The evidence is insufficient to determine the effects of the technology on health outcomes.

BILLING/CODING INFORMATION:

CPT Coding:

46601	Anoscopy; diagnostic, with high-resolution magnification (HRA) (e.g., colposcope, operating microscope) and chemical agent enhancement, including collection of specimen(s) by brushing or washing, when performed
46607	Anoscopy; with high-resolution magnification (HRA) (e.g., colposcope, operating microscope) and chemical agent enhancement, with biopsy, single or multiple

ICD-10 Diagnosis Codes That Support Medical Necessity:

A63.0	Anogenital (venereal) warts
C21.0	Malignant neoplasm of anus, unspecified
C21.1	Malignant neoplasm of anal canal
C78.5	Secondary malignant neoplasm of large intestine and rectum
D01.3	Carcinoma in situ of anus and anal canal
D12.7 – D12.9	Benign neoplasm of rectum, anus, and anal canal
K62.0	Anal polyp
K62.1	Rectal polyp
K62.5	Hemorrhage of anus and rectum
K62.6	Ulcer of anus and rectum
K62.7	Radiation proctitis
K62.81 – K62.89	Other specified diseases of anus and rectum
R85.610 – R85.619	Abnormal cytologic smear of anus

REIMBURSEMENT INFORMATION:

Refer to sections entitled [POSITION STATEMENT](#).

PROGRAM EXCEPTIONS:

Federal Employee Program (FEP): Follow FEP guidelines.

State Account Organization (SAO): Follow SAO guidelines.

Medicare Advantage Products: No National Coverage Determination (NCD) and/or Local Coverage Determination (LCD) was found at the time of the last guideline reviewed date.

If this Medical Coverage Guideline contains a step therapy requirement, in compliance with Florida law 627.42393, members or providers may request a step therapy protocol exemption to this requirement if based on medical necessity. The process for requesting a protocol exemption can be found at [Coverage Protocol Exemption Request](#).

DEFINITIONS:

Anal dysplasia: Anal cells that look abnormal under a microscope but are not cancer.

RELATED GUIDELINES:

None applicable.

OTHER:

None.

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COMMITTEE APPROVAL:

This Medical Coverage Guideline (MCG) was approved by the Florida Blue Medical Policy and Coverage Committee on 06/26/25.

GUIDELINE UPDATE INFORMATION:

05/15/12	New Medical Coverage Guideline.
05/15/13	Scheduled review; position statement unchanged, Program Exceptions section updated, references updated.
04/15/14	Annual review; position statement unchanged; references updated.
01/01/15	Annual coding update: removed 0226T and 0227T; added 46601 and 46607.
11/01/15	Revision: ICD-9 Codes deleted.
01/01/16	Annual HCPCS/CPT update; codes G6027 and G6028 deleted.
10/01/16	Revision; coding section updated; formatting changes.
04/15/18	Review; Update position statements, description, coding, and references.
03/15/20	Review; Position statements maintained and references updated.
03/15/22	Review: Position statements maintained; references updated.
05/25/23	Update to Program Exceptions section.
01/01/24	Position statements maintained.
08/15/24	Review: Position statements maintained; description and references updated.
07/15/25	Review: Position statements maintained; references updated.