

PROVIDER NOTICE

Provider Relations Department: 888-895-4998 (Option 4)

New Code Change for USFHP Effective Jan. 1, 2025

Effective Dates: Jan. 1, 2025

Health Plans Affected: US Family Health Plan (USFHP)

Type of Change: Authorization Status

Explanation of Change:

Please note the following new code change for USFHP effective Jan. 1, 2025.

Procedure Code 81515

Infectious disease, bacterial vaginosis and vaginitis (BV), real-time PCR amplification of DNA markers for Atopobium vaginae, Atopobium species, Megasphaera type I, and Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), utilizing vaginal-fluid specimens, algorithm reported as positive or negative for high likelihood of bacterial vaginosis, includes separate detection of Trichomonas vaginalis and Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata/Candida krusei, when reported.

Code 81515 will be paid with the diagnoses below. The code will be Non-Covered (NC) if it is not billed with one of the following diagnoses:

- B37.31
- B37.32
- L29.2
- L29.3
- N76.0
- N76.1
- N76.2
- N76.3
- N76.89N77.1
- N89.8
- N94.10 N94.19
- R30.0

NOTE: No prior authorization is needed if code 81515 is billed with the diagnosis codes listed above.