

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT2022115    DECEMBER 15, 2022

## IHCP to add coverage for nucleic acid amplification tests for bacterial vaginitis

Effective Jan. 16, 2023, the Indiana Health Coverage Programs (IHCP) will add coverage for Current Procedural Terminology (CPT<sup>®1</sup>) code 81513 – *Infectious disease, bacterial vaginosis, quantitative real-time amplification of RNA markers for Atopobium vaginae, Gardnerella vaginalis, and Lactobacillus species, utilizing vaginal-fluid specimens, algorithm reported as a positive or negative result for bacterial vaginosis* for nucleic acid amplification tests (NAATs) to detect the presence of bacterial vaginitis.

Coverage applies to fee-for-service Traditional Medicaid and all IHCP managed care programs, including Healthy Indiana Plan (HIP), Hoosier Care Connect and Hoosier Healthwise. This service will remain noncovered under some IHCP programs with limited benefits, such as the Family Planning Eligibility Program.

Effective for dates of service on or after Jan. 16, 2023, the following coverage and reimbursement information applies:

- Pricing: Maximum fee of \$142.63
- Prior authorization (PA): None required
- Billing guidance: Standard guidance applies

Reimbursement, PA and billing information applies to services delivered under the FFS delivery system. Individual managed care entities (MCEs) establish and publish reimbursement, PA and billing criteria within the managed care delivery system. Questions about managed care reimbursement, PA or billing should be directed to the MCE with which the member is enrolled.



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### QUESTIONS?

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