

Sexually Transmitted Infection Testing Policy, Professional and Facility – Effective 10/1/2020

UnitedHealthcare Community Plan - Tennessee is implementing a new Sexually Transmitted Infection Testing Policy for professional and facility claims with dates of services on or after 10/1/2020.

UnitedHealthcare Community Plan will reimburse for the following services to detect sexually transmitted infections (STIs) in men and women:

Single Tests:

- 87491 – Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique
- 87591 – Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoea, amplified probe technique
- 87661 – Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, amplified probe technique

Comprehensive Test:

- 87801 – Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms

Procedure code 87801 is a more comprehensive, multiple organisms code for infectious agent detection by nucleic acid. When any two or more of the single test codes (87491, 87591 and/or 87661) are billed separately for the same provider and the same date of service, the reimbursement will be based on the rate for 87801, which is the more comprehensive, multiple organisms code. Regardless of the units billed for a single code, payment will be made based on a single unit of 87801.

You can find these updates at UHCprovider.com/policies > Community Plan Policies > [Reimbursement Policies for Community Plan](#).

We're Here to Help

If you have questions about policy updates, please contact your Network Account Manager or Provider Advocate. Thank you.

Note About Reimbursement Policies

As with all UnitedHealthcare Community Plan policies, other factors affecting reimbursement may supplement, modify or in some cases supersede this policy. These factors include, but are not limited to, federal and/or state regulatory requirements, physician or other provider contracts and/or the member's benefit coverage documents. Unless otherwise noted, these reimbursement policies apply to services reported using the CMS-1500 or its electronic equivalent, or its successor form.

UnitedHealthcare Community Plan reimbursement policies don't address all issues related to reimbursement for services rendered to our members, such as the member's benefit plan documents, our medical policies and the UnitedHealthcare Community Plan Administrative Guide or Care Provider Manual. Meeting the terms of a particular reimbursement policy is not a guarantee of payment. Likewise, retirement of a reimbursement policy affects only those system edits associated with the specific policy being retired. Retirement of a reimbursement policy is not a guarantee of payment. Other applicable reimbursement and medical policies and claims edits will continue to apply.

If there's an inconsistency or conflict between the information in this provider notification and the posted policy, the provisions of the posted reimbursement policy prevail.