

## **PROVIDER NOTICE**

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

## **CORRECTION:** Prior Authorization Requirement Change for Specific Prenatal Screening for USFHP

Corrected Implementation Date: April 12, 2024

**Health Plan(s) Affected:** US Family Health Plan (USFHP)

Type of Change: Process

## **Explanation of Change:**

Due to a clerical error, an incorrect code was transcribed for the prior authorization requirement. The corrections are noted in red.

TRICARE® approved the following changes to codes for USFHP:

No prior authorization (NPA) required for the Noninvasive Prenatal Screening for Trisomies, Implementation date April 12, 2024:

- Per TOM Change 133, Noninvasive Prenatal Screening for Trisomies 13, 18, 21, X & Y is covered in accordance with the most current <u>ACOG guidelines</u>\*.
  - o Codes 81420 and 81507 change to NPA.

\*This link is from an external website that is not provided or maintained by or in any way affiliated with Johns Hopkins Health Plans. Please note Johns Hopkins Health Plans does not guarantee the accuracy, relevance, timeliness, or completeness of any information on external websites.

Tricare is a registered trademark of the Department of Defense, Defense Health Agency. All rights reserved.