



of Tennessee

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bcbst.com



Confirmation Of Pregnancy Visit Covered Through CoverTN Benefits

Although the CoverTN health benefit plan does not include maternity coverage, services for the confirmation of pregnancy will be covered. The initial visit and lab charges to **confirm pregnancy** will be covered when billed with the appropriate procedure/diagnosis codes.

Procedure Codes

- 81025** Urine pregnancy test, by visual color comparison methods
- 84702** Gonadotropin, chorionic (hCG); quantitative
- 84703** Gonadotropin, chorionic (hCG); qualitative
- S3625** Maternal serum triple marker screen including alpha-fetoprotein (AFP), estriol, and HCG
- S3626** Maternal serum quadruple marker screen including alpha-fetoprotein (AFP), estriol, HCG & inhibin A

Possible DX Codes

- 626.0** Absence of menstruation
- V7240** Pregnancy examination or test, pregnancy unconfirmed
- V7241** Pregnancy examination or test, negative result
- V7242** Pregnancy examination or test, positive result

Maternity care that is needed after the confirmation of a pregnancy, for example, the initial prenatal visit, is not a covered service under CoverTN. Pregnant members can receive coverage under the CoverKids program for prenatal, delivery and 60 days of post-partum care if eligible.

CoverTN members with a physician confirmed pregnancy should immediately request an application for CoverKids from Policy Studies Inc., by calling 1-866-620-8864 or apply online at:

http://www.covertn.gov/web/coverkids_app.html