

Effective date: Nov. 1, 2025

### Applies to:

#### Commercial Products

- Harvard Pilgrim Health Care Commercial products
- Tufts Health Plan Commercial products

#### Public Plans Products

- Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
- Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans
- Tufts Health RITogether – A Rhode Island Medicaid Plan
- Tufts Health One Care – A dual-eligible product

#### Senior Products

- Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
- Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

## Policy

Vaginitis is defined as inflammation of the vagina with symptoms of discharge, itching, and discomfort often due to a disruption of the vaginal microflora. The most common infections are bacterial vaginosis, *Candida* vulvovaginitis, and trichomoniasis. Other causes include vaginal atrophy in postmenopausal women, cervicitis, foreign body, irritants, and allergens.

Bacterial vaginosis (BV) is characterized by a shift in microbial species from the normally dominant hydrogen peroxide producing *Lactobacillus* species to *Gardnerella vaginalis* and anaerobic commensals.

Vulvovaginal candidiasis (VVC) is usually caused by *Candida albicans* but can occasionally be caused by other *Candida* species. It is the second most common cause of vaginitis symptoms (after BV) and accounts for approximately one-third of vaginitis cases. [For guidance on testing for \*Candida\* as the cause of onychomycosis, refer to the Onychomycosis Testing policy.](#)

Trichomoniasis is caused by the flagellated protozoan *Trichomonas vaginalis*, which principally infects the squamous epithelium in the urogenital tract: vagina, urethra, and paraurethral glands. [This policy only addresses testing for \*T. vaginalis\* in vaginitis panels. For guidance on single organism amplified probe testing for \*T. vaginalis\*, refer to the Diagnostic Testing of Common Sexually Transmitted Infections policy.](#)

## Indications and/or Limitations of Coverage

Application of coverage criteria is dependent upon an individual's benefit coverage at the time of the request.

1. For individuals with signs and symptoms of vaginitis, testing of pH, testing for the presence of amines, measurement of sialidase activity, saline wet mount, potassium hydroxide (KOH) wet mount, and microscopic examination of vaginal fluids **MEETS COVERAGE CRITERIA.**
2. For individuals with signs and symptoms of vaginitis, direct probe DNA-based identification of *Gardnerella*, *Trichomonas*, and *Candida* (e.g., BD Affirm™ VPIII) **MEETS COVERAGE CRITERIA.**
3. For individuals with signs and symptoms of vaginitis but with negative findings on wet-mount preparations and a normal pH test, vaginal cultures for *Candida* species for the diagnosis of vulvovaginal candidiasis **MEET COVERAGE CRITERIA.**
- ~~4. For individuals with signs and symptoms of vaginitis, nucleic acid amplification testing (NAAT) or polymerase chain reaction (PCR)-based identification of *Trichomonas vaginalis* **MEETS COVERAGE CRITERIA.**~~
- ~~5. For individuals with risk factors for trichomoniasis (new or multiple partners; history of sexually transmitted infections (STIs), especially HIV; exchange of sex for payment; incarceration; injection drug use), screening for *Trichomonas* **MEETS COVERAGE CRITERIA.**~~
- ~~6-4.~~ For individuals with complicated vulvovaginal candidiasis (VVC), [qualitative](#) polymerase chain reaction (PCR) based identification of *Candida* to confirm clinical diagnosis and identify non-albicans *Candida* **MEETS COVERAGE CRITERIA.**

- 7-5.** For individuals with signs and symptoms of bacterial vaginosis (BV), NAAT specific to the diagnosis of BV (e.g., Aptima® BV; OneSwab® BV Panel PCR with Lactobacillus Profiling by qPCR; SureSwab® Advanced BV, TMA) and single or multitarget PCR testing for the diagnosis of BV **MEETS COVERAGE CRITERIA.**
- 8-6.** For individuals with signs and symptoms of vaginitis, NAAT panel testing (no more than one test every seven days; see Note 1) designed to detect more than one type of vaginitis (VVC, BV, and/or trichomoniasis; e.g., BD MAX™ Vaginal Panel, NuSwab® VG) **MEETS COVERAGE CRITERIA.**
- 7.** For asymptomatic individuals, including asymptomatic pregnant individuals at an average or high risk for premature labor, screening for trichomoniasis and bacterial vaginosis **DOES NOT MEET COVERAGE CRITERIA.**
- 9-8.** For all other situations not described above, NAAT testing for Candida (e.g., quantitative NAAT testing) **DOES NOT MEET COVERAGE CRITERIA.**

The following does not meet coverage criteria due to a lack of available published scientific literature confirming that the test(s) is/are required and beneficial for the diagnosis and treatment of an individual's illness.

- ~~**10.** For individuals with symptoms of vaginitis, rapid identification of *Trichomonas* by enzyme immunoassay **DOES NOT MEET COVERAGE CRITERIA.**~~
- 11-9.** Testing for microorganisms involved in vaginal flora imbalance and/or infertility using molecular-based panel testing **DOES NOT MEET COVERAGE CRITERIA.**
- 12-10.** All other tests for vaginitis (e.g., broad molecular panels designed to concurrently test for vaginitis and various other STIs) not addressed above **DO NOT MEET COVERAGE CRITERIA.**

#### **NOTES:**

**Note 1:** Per CDC recommendations, the longest minimum treatment for an organism included on the allowed vaginitis panels is a seven day course of antibiotics to treat trichomoniasis. NAAT panel testing for all three types of vaginitis should not be repeated before a minimum treatment window has passed. When symptoms persist despite treatment, individual organism testing may be performed within this window.

## **Applicable CPT/HCPCS Procedure Codes**

Procedure codes appearing in policy documents are included only as a general reference tool for each policy. They may not be all-inclusive.

### **Coding**

<b>Code</b>	<b>Description</b>
81513	Infectious disease, bacterial vaginosis, quantitative real-time amplification of RNA markers for <i>Atopobium vaginae</i> , <i>Gardnerella vaginalis</i> , and <i>Lactobacillus</i> species, utilizing vaginal-fluid specimens, algorithm reported as a positive or negative result for bacterial vaginosis  <i>Proprietary test: Aptima® BV Assay</i> <i>Lab/Manufacturer: Hologic, Inc</i>
81514	Infectious disease, bacterial vaginosis and vaginitis, quantitative real-time amplification of DNA markers for <i>Gardnerella vaginalis</i> , <i>Atopobium vaginae</i> , <i>Megasphaera</i> type 1, Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), and <i>Lactobacillus</i> species ( <i>L. crispatus</i> and <i>L. jensenii</i> ), utilizing vaginal-fluid specimens, algorithm reported as a positive or negative for high likelihood of bacterial vaginosis, includes separate detection of <i>Trichomonas vaginalis</i> and/or <i>Candida</i> species ( <i>C. albicans</i> , <i>C. tropicalis</i> , <i>C. parapsilosis</i> , <i>C. dubliniensis</i> ), <i>Candida glabrata</i> , <i>Candida krusei</i> , when reported ( <del>Do not report 81514 in conjunction with 87480, 87481, 87482, 87510, 87511, 87512, 87660, 87661</del> )  <i>Proprietary test: BD MAX™ Vaginal Panel</i> <i>Lab/Manufacturer: Becton-Dickson and Company</i>
82120	Amines, vaginal fluid, qualitative
83986	pH; body fluid, not otherwise specified
87070	Culture, bacterial; any other source except urine, blood or stool, aerobic, with isolation and presumptive identification of isolates
87149	Culture, typing; identification by nucleic acid (DNA or RNA) probe, direct probe technique, per culture or isolate, each organism probed
87150	Culture, typing; identification by nucleic acid (DNA or RNA) probe, amplified probe technique, per culture or isolate, each organism probed
87210	Smear, primary source with interpretation; wet mount for infectious agents (e.g., saline, India ink, KOH preps)
87480	Infectious agent detection by nucleic acid (DNA or RNA); <i>Candida</i> species, direct probe technique

Code	Description
87481	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, amplified probe technique
87482	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, quantification
87510	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, direct probe technique
87511	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, amplified probe technique
87512	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, quantification
87660	Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, direct probe technique
<del>87664</del>	<del>Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, amplified probe technique</del>
87797	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; direct probe technique, each organism
87798	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism
87799	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; quantification, each organism
87800	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique
87801	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; amplified probe(s) technique
<del>87808</del>	<del>Infectious agent antigen detection by immunoassay with direct optical (i.e., visual) observation; Trichomonas vaginalis</del>
87905	Infectious agent enzymatic activity other than virus (e.g., sialidase activity in vaginal fluid)
<u>0068U</u>	<u>Candida species panel (C. albicans, C. glabrata, C. parapsilosis, C. krusei, C. tropicalis, and C. auris), amplified probe technique with qualitative report of the presence or absence of each species (Effective for DOS beginning June 1, 2026)</u> <u>Proprietary test: MYCODART-PCR™ Dual Amplification Real Time PCR Panel for 6 Candida species</u> <u>Lab/Manufacturer: RealTime Laboratories, Inc/MycoDART, Inc.</u>
0330U	Infectious agent detection by nucleic acid (DNA or RNA), vaginal pathogen panel, identification of 27 organisms, amplified probe technique, vaginal swab Proprietary test: Bridge Women's Health Infectious Disease Detection Test Lab/Manufacturer: Bridge Diagnostics/ThermoFisher and Hologic Test Kit on Panther Instrument
0505U	Infectious disease (vaginal infection), identification of 32 pathogenic organisms, swab, real-time PCR, reported as positive or negative for each organism Proprietary test: Vaginal Infection Testing Lab/Manufacturer: NxGen MDx LLC
<u>0557U</u>	<u>Infectious disease (bacterial vaginosis and vaginitis), real-time amplification of DNA markers for Atopobium vaginae, Gardnerella vaginalis, Megaspheera types 1 and 2, bacterial vaginosis associated bacteria-2 and -3 (BVAB-2, BVAB-3), Mobiluncus species, Trichomonas vaginalis, Neisseria gonorrhoeae, Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. glabrata, C. krusei), Herpes simplex viruses 1 and 2, vaginal fluid, reported as detected or not detected for each organism (Effective for DOS beginning June 1, 2026)</u> <u>Proprietary test: HealthTrackRx Vaginitis</u> <u>Lab/Manufacturer: HealthTrackRx, Thermo Fisher Scientific</u>
Q0111	Wet mounts, including preparations of vaginal, cervical or skin specimens

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## Publication History

- 06/01/2026: [Annual policy review; administrative edits; removed 87661 and 87808; added 0557U and 0068U to coding grid, effective for DOS beginning June 1, 2026](#)
- 09/01/2025: Policy created to support coverage guidelines, effective for dates of service beginning Nov. 1, 2025
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## Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the

check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization, and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.