

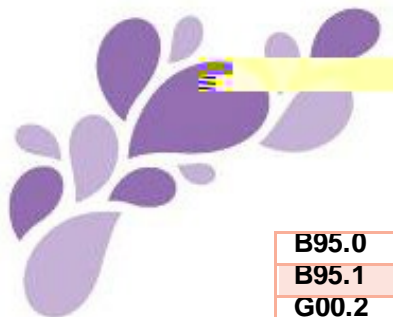
Molecular Diagnostic Testing for Streptococcus A and B Infection	PY-0871	11/01/2019-08/31/2022	
Policy Type			
Medical	Administrative	Pharmacy	REIMBURSEMENT

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Reimbursement Policy Statement.....1

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Effective Date: 11/01/2019

B95.0	Streptococcus, group A, as the cause of diseases classified elsewhere
B95.1	Streptococcus, group B, as the cause of diseases classified elsewhere
G00.2	Streptococcal meningitis
I00	Rheumatic fever without heart involvement
I01.0	Acute rheumatic pericarditis
I01.1	Acute rheumatic endocarditis
I01.2	Acute rheumatic myocarditis
I01.8	

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