



BlueCross BlueShield
of New Mexico

If a conflict arises between a Clinical Payment and Coding Policy and any plan document under which a member is entitled to Covered Services, the plan document will govern. If a conflict arises between a CPCP and any provider contract pursuant to which a provider participates in and/or provides Covered Services to eligible member(s) and/or plans, the provider contract will govern. "Plan documents" include, but are not limited to, Certificates of Health Care Benefits, benefit booklets, Summary Plan Descriptions, and other coverage documents. Blue Cross and Blue Shield of New Mexico may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSNM has full and final discretionary authority for their interpretation and application to the extent provided under any applicable plan documents.

Providers are responsible for submission of accurate documentation of services performed. Providers are expected to submit claims for services rendered using valid code combinations from Health Insurance Portability and Accountability Act approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing Editor, American Medical Association, Current Procedural Terminology, CPT® Assistant, Healthcare Common Procedure Coding System, ICD-10 CM and PCS, National Drug Codes, Diagnosis Related Group guidelines, Centers for Medicare and Medicaid Services National Correct Coding Initiative Policy Manual, CCI table edits and other CMS guidelines.

Claims are subject to the code edit protocols for services/procedures billed. Claim submissions are subject to claim review including but not limited to, any terms of benefit coverage, provider contract language, medical policies, clinical payment and coding policies as well as coding software logic. Upon request, the provider is urged to submit any additional documentation.

β - Hemolytic Streptococcus Testing

Policy Number: CPCPLAB053

Version 1.0

Approval Date: 09/26/2025

Plan Effective Date: 01/03/2026

Description

The Plan has implemented certain lab management reimbursement criteria. Not all requirements apply to each product. Providers are urged to review Plan documents for eligible coverage for services rendered.

Reimbursement Information:

Note 1: For prenatal screening of Group B Streptococcus, please review policy CPCPLAB014 Prenatal Screening (Nongenetic).

- 1) For the detection of a streptococcal infection causing respiratory illness, bacterial culture testing from a throat swab **may be reimbursable** when **one** of the following conditions is met:
 - a) When the individual has a modified Centor criteria score of 3 or greater (See **Note 2** below).
 - b) When the individual is suspected of having bacterial pharyngitis in the absence of viral features (e.g., cough, oral ulcers, rhinorrhea).
 - c) Following a negative rapid antigen diagnostic test (RADT) in a symptomatic child or adolescent.
- 2) In cases of skin and/or soft tissue infections, bacterial culture testing for a streptococcal infection from a skin swab or from pus **may be reimbursable**.
- 3) For individuals with suspected acute rheumatic fever (ARF) or post-streptococcal glomerulonephritis (PSGN), the following testing **may be reimbursable**:
 - a) Serological titer testing;
 - b) Anti-streptolysin O immunoassay;
 - c) Hyaluronidase activity or anti-hyaluronidase immunoassay;
 - d) Streptokinase activity or anti-streptokinase immunoassay.
- 4) In cases of suspected viral pharyngitis, bacterial culture testing for streptococci from a throat swab **is not reimbursable**.
- 5) Except in cases of asymptomatic children under the age of three years who have a mitigating circumstance (including a symptomatic family member), RADT for a streptococcal infection **is not reimbursable** in **any** of the following situations:
 - a) As a follow-up test for individuals who have had either a bacterial culture test or a nucleic acid test for a streptococcal infection.
 - b) As a screening method in an asymptomatic patient.
- 6) For all situations not described above, serological titer testing **is not reimbursable**.

- 7) Simultaneous ordering of **both** direct probe and amplification probe for the same organism in a single encounter **is not reimbursable**.
- 8) For all situations not described above, testing with an anti-streptolysin O immunoassay, a hyaluronidase activity or anti-hyaluronidase immunoassay, or a streptokinase activity or anti-streptokinase immunoassay **is not reimbursable**.
- 9) For all situations, the following tests **are not reimbursable**:
 - a) Panel tests that screen and identify multiple streptococcal strains (*S. pyogenes* [group A], *S. agalactiae* [group B], *S. dysgalactiae* [groups C/G], α -hemolytic *Streptococcus*, and/or γ -hemolytic *Streptococcus*), using either immunoassay or nucleic acid-based assays, (e.g., Solana Strep Complete Assay, Lyra Direct Strep Assay).
 - b) The quantification of any strain of streptococcus using nucleic acid amplification, including PCR.
 - c) Nicotinamide-adenine dinucleotidase activity or anti-nicotinamide-adenine immunoassay.

Note 2: Centor criteria includes tonsillar exudates, tender anterior cervical lymphadenopathy, fever, and absence of cough with each criterion being worth one point. (2)

Procedure Codes

The following is not an all-encompassing code list. The inclusion of a code does not guarantee it is a covered service or eligible for reimbursement.

Codes
86060, 86063, 86215, 86317, 86318, 86581, 87070, 87071, 87077, 87081, 87430, 87650, 87651, 87652, 87797, 87798, 87799, 87880

References:

1. Wessels MR. Group C and group G streptococcal infection. Updated June 14, 2024. <https://www.uptodate.com/contents/group-c-and-group-g-streptococcal-infection>
2. Chow AW. Evaluation of acute pharyngitis in adults. Updated October 5, 2023. <https://www.uptodate.com/contents/evaluation-of-acute-pharyngitis-in-adults>
3. Schwartz B, Facklam RR, Breiman RF. Changing epidemiology of group A streptococcal infection in the USA. *Lancet (London, England)*. Nov 10 1990;336(8724):1167-71.

4. CDC. Clinical Considerations for Group A Streptococcus. Updated August 5, 2025. <https://www.cdc.gov/group-a-strep/hcp/clinical-guidance/index.html>
5. CDC. Clinical Guidance for Scarlet Fever. Updated August 5, 2025. <https://www.cdc.gov/group-a-strep/hcp/clinical-guidance/scarlet-fever.html>
6. CDC. Diagnosing Acute Rheumatic Fever. Updated August 6, 2025. <https://www.cdc.gov/group-a-strep/hcp/clinical-guidance/diagnosing-acute-rheumatic-fever.html>
7. CDC. Clinical Guidelines for Post-Streptococcal Glomerulonephritis. Updated August 5, 2025. <https://www.cdc.gov/group-a-strep/hcp/clinical-guidance/post-streptococcal-glomerulonephritis.html>
8. Stevens DL, Bryant A. Group A streptococcus: Virulence factors and pathogenic mechanisms. Updated April 9, 2024. <https://www.uptodate.com/contents/group-a-streptococcus-virulence-factors-and-pathogenic-mechanisms>
9. Steer A, Gibofsky A. Acute rheumatic fever: Clinical manifestations and diagnosis. Updated May 15, 2024. <https://www.uptodate.com/contents/acute-rheumatic-fever-clinical-manifestations-and-diagnosis>
10. Steer AC, Smeesters PR, Curtis N. Streptococcal Serology: Secrets for the Specialist. *The Pediatric infectious disease journal*. Nov 2015;34(11):1250-2. doi:10.1097/inf.0000000000000881
11. Blyth CC, Robertson PW. Anti-streptococcal antibodies in the diagnosis of acute and post-streptococcal disease: streptokinase versus streptolysin O and deoxyribonuclease B. *Pathology*. Apr 2006;38(2):152-6. doi:10.1080/00313020600557060
12. Bruun T, Kittang BR, de Hoog BJ, et al. Necrotizing soft tissue infections caused by Streptococcus pyogenes and Streptococcus dysgalactiae subsp. equisimilis of groups C and G in western Norway. *Clinical microbiology and infection : the official publication of the European Society of Clinical Microbiology and Infectious Diseases*. Dec 2013;19(12):E545-50. doi:10.1111/1469-0691.12276
13. Rantala S. Streptococcus dysgalactiae subsp. equisimilis bacteremia: an emerging infection. *European journal of clinical microbiology & infectious diseases : official publication of the European Society of Clinical Microbiology*. Aug 2014;33(8):1303-10. doi:10.1007/s10096-014-2092-0
14. Barshak MB, Madoff LC. Group B streptococcal infections in nonpregnant adults. Updated August 20, 2025. <https://www.uptodate.com/contents/group-b-streptococcal-infections-in-nonpregnant-adults>
15. Puopolo KM, Madoff LC. Group B streptococcal infection during pregnancy. Updated July 16, 2024. <https://www.uptodate.com/contents/group-b-streptococcal-infection-during-pregnancy>
16. Pediatrics AAo. Group B Streptococcal Infections. In: Kimberlin D, Brady M, Jackson M, Long S, eds. *Red Book: 2018 Report of the Committee on Infectious Diseases*. American Academy of Pediatrics; 2018:762-68.
17. AACC. Strep Throat Test. Updated January 27, 2021. <https://labtestsonline.org/tests/strep-throat-test>
18. Gera K, McIver KS. Laboratory Growth and Maintenance of Streptococcus pyogenes (The Group A Streptococcus, GAS). *Current protocols in microbiology*. 2013;30:9d.2.1-9d.2.13. doi:10.1002/9780471729259.mc09d02s30
19. Spellerberg B, Brandt C. Laboratory Diagnosis of Streptococcus pyogenes (group A streptococci). In: Ferretti JJ, Stevens DL, Fischetti VA, eds. *Streptococcus*

pyogenes : Basic Biology to Clinical Manifestations. University of Oklahoma Health Sciences Center; 2016.

20. Wald ER. Group A streptococcal tonsillopharyngitis in children and adolescents: Clinical features and diagnosis. Updated May 29, 2025.
<https://www.uptodate.com/contents/group-a-streptococcal-tonsillopharyngitis-in-children-and-adolescents-clinical-features-and-diagnosis>
21. Shulman ST, Bisno AL, Clegg HW, et al. Clinical practice guideline for the diagnosis and management of group A streptococcal pharyngitis: 2012 update by the Infectious Diseases Society of America. *Clinical infectious diseases* : an official publication of the Infectious Diseases Society of America. Nov 15 2012;55(10):e86-102. doi:10.1093/cid/cis629
22. Miller JM, Binnicker MJ, Campbell S, et al. A Guide to Utilization of the Microbiology Laboratory for Diagnosis of Infectious Diseases: 2018 Update by the Infectious Diseases Society of America and the American Society for Microbiology. *Clinical Infectious Diseases*. 2018;67(6):e1-e94. doi:10.1093/cid/ciy381
23. Freeman J, Roberts S. Approach to Gram stain and culture results in the microbiology laboratory. Updated July 31, 2024.
<https://www.uptodate.com/contents/approach-to-gram-stain-and-culture-results-in-the-microbiology-laboratory>
24. Weinzierl EP, Jerris RC, Gonzalez MD, Piccini JA, Rogers BB. Comparison of Alere i Strep A Rapid Molecular Assay With Rapid Antigen Testing and Culture in a Pediatric Outpatient Setting. *American Journal of Clinical Pathology*. 2018;aqy038-aqy038. doi:10.1093/ajcp/aqy038
25. Cohen JF, Bertille N, Cohen R, Chalumeau M. Rapid antigen detection test for group A streptococcus in children with pharyngitis. *The Cochrane database of systematic reviews*. Jul 4 2016;7:CD010502. doi:10.1002/14651858.CD010502.pub2
26. Cohen DM, Russo ME, Jaggi P, Kline J, Gluckman W, Parekh A. Multicenter Clinical Evaluation of the Novel Alere i Strep A Isothermal Nucleic Acid Amplification Test. *Journal of clinical microbiology*. Jul 2015;53(7):2258-61. doi:10.1128/jcm.00490-15
27. Boyanton BL, Jr., Darnell EM, Prada AE, Hansz DM, Robinson-Dunn B. Evaluation of the Lyra Direct Strep Assay To Detect Group A Streptococcus and Group C and G Beta-Hemolytic Streptococcus from Pharyngeal Specimens. *Journal of clinical microbiology*. Jan 2016;54(1):175-7. doi:10.1128/jcm.02405-15
28. Uphoff TS, Buchan BW, Ledeboer NA, Granato PA, Daly JA, Marti TN. Multicenter Evaluation of the Solana Group A Streptococcus Assay: Comparison with Culture. *Journal of clinical microbiology*. Sep 2016;54(9):2388-90. doi:10.1128/jcm.01268-16
29. Church DL, Lloyd T, Larios O, Gregson DB. Evaluation of Simplexa Group A Strep Direct Kit Compared to Hologic Group A Streptococcal Direct Assay for Detection of Group A Streptococcus in Throat Swabs. *Journal of clinical microbiology*. Mar 2018;56(3)doi:10.1128/jcm.01666-17
30. K162274 510(k) premarket notification of intent to market Solana Strep Complete Assay (FDA) (2016).
31. Helmig RB, Gertsen JB. Diagnostic accuracy of polymerase chain reaction for intrapartum detection of group B streptococcus colonization. *Acta obstetricia et gynecologica Scandinavica*. Sep 2017;96(9):1070-1074. doi:10.1111/aogs.13169
32. Raignoux J, Benard M, Huo Yung Kai S, et al. [Is rapid intrapartum vaginal screening test of group B streptococci (GBS) during partum useful in identifying infants

- developing early-onset GBS sepsis in postpartum period?]. *Archives de pediatrie : organe officiel de la Societe francaise de pediatrie*. Sep 2016;23(9):899-907. Test de depistage rapide intra partum du portage vaginal de streptocoque du groupe B (SGB) pour le repereage des nouveau-nes a risque d'infection neonatale precoce a SGB. Etude observationnelle analytique dans une maternite de type III. doi:10.1016/j.arcped.2016.06.003
33. Luo R, Sickler J, Vahidnia F, Lee Y-C, Frogner B, Thompson M. Diagnosis and Management of Group a Streptococcal Pharyngitis in the United States, 2011–2015. *BMC Infectious Diseases*. 2019/02/26 2019;19(1):193. doi:10.1186/s12879-019-3835-4
 34. O. Luiz F, Alves KB, Barros RR. Prevalence and long-term persistence of beta-haemolytic streptococci throat carriage among children and young adults. *J Med Microbiol*. Oct 2019;68(10):1526-1533. doi:10.1099/jmm.0.001054
 35. Fraser H, Gallacher D, Achana F, et al. Rapid antigen detection and molecular tests for group A streptococcal infections for acute sore throat: systematic reviews and economic evaluation. *Health Technol Assess*. Jun 2020;24(31):1-232. doi:10.3310/hta24310
 36. Kim HN, Kim J, Jang WS, Nam J, Lim CS. Performance evaluation of three rapid antigen tests for the diagnosis of group A Streptococci. *BMJ Open*. Aug 5 2019;9(8):e025438. doi:10.1136/bmjopen-2018-025438
 37. Bilir SP, Kruger E, Faller M, et al. US cost-effectiveness and budget impact of point-of-care NAAT for streptococcus. *Am J Manag Care*. May 1 2021;27(5):e157-e163. doi:10.37765/ajmc.2021.88638
 38. Dubois C, Smeesters PR, Refes Y, et al. Diagnostic accuracy of rapid nucleic acid tests for group A streptococcal pharyngitis: systematic review and meta-analysis. *Clinical Microbiology and Infection*. 2021/05/06/ 2021;doi:10.1016/j.cmi.2021.04.021
 39. McCarty T, White C, Meeder J, et al. Analytical performance and potential clinical utility of the GenMark Dx ePlex® blood culture identification gram-positive panel. *Diagnostic Microbiology and Infectious Disease*. 2022;104(3):115762.
 40. CDC. Clinical Guidance for Group A Streptococcal Pharyngitis. Updated August 5, 2025. <https://www.cdc.gov/group-a-strep/hcp/clinical-guidance/strep-throat.html>
 41. Kimberlin DW, Barnett ED, Lynfield R, Sawyer MH. *Group A Streptococcal Infections*. 2021.
 42. Puopolo KM, Lynfield R, Cummings JJ. Management of Infants at Risk for Group B Streptococcal Disease. *Pediatrics*. 2019;144(2):e20191881. doi:10.1542/peds.2019-1881
 43. Gewitz M, H., Baltimore R, S., Tani L, Y., et al. Revision of the Jones Criteria for the Diagnosis of Acute Rheumatic Fever in the Era of Doppler Echocardiography. *Circulation*. 2015/05/19 2015;131(20):1806-1818. doi:10.1161/CIR.0000000000000205
 44. Short S, Bashir H, Marshall P, et al. *Diagnosis and Treatment of Respiratory Illness in Children and Adults*. 5th ed. Institute for Clinical Systems Improvement; 2017.
 45. Centor RM, McIsaac W. Centor Score (Modified/McIsaac) for Strep Pharyngitis. MDCalc. 2022. <https://www.mdcalc.com/centor-score-modified-mcisaac-strep-pharyngitis>
 46. Metlay JP, Waterer GW, Long AC, et al. Diagnosis and Treatment of Adults with Community-acquired Pneumonia. An Official Clinical Practice Guideline of the

- American Thoracic Society and Infectious Diseases Society of America. *Am J Respir Crit Care Med*. Oct 1 2019;200(7):e45-e67. doi:10.1164/rccm.201908-1581ST
47. Stevens DL, Bisno AL, Chambers HF, et al. Practice Guidelines for the Diagnosis and Management of Skin and Soft Tissue Infections: 2014 Update by the Infectious Diseases Society of America. *Clinical Infectious Diseases*. 2014;59(2):e10-e52. doi:10.1093/cid/ciu296
 48. Mitchell RB, Archer SM, Ishman SL, et al. Clinical Practice Guideline: Tonsillectomy in Children (Update). *Otolaryngol Head Neck Surg*. Feb 2019;160(1_suppl):S1-s42. doi:10.1177/0194599818801757
 49. IDSA. Clinical Practice Guideline: Tonsillectomy in Children (Update) (Endorsed). <https://www.idsociety.org/practice-guideline/tonsillectomy-in-children/>
 50. AAOS. DIAGNOSIS AND PREVENTION OF PERIPROSTHETIC JOINT INFECTIONS CLINICAL PRACTICE GUIDELINE. <https://aaos.org/globalassets/quality-and-practice-resources/pji/pji-clinical-practice-guideline-final-9-18-19-.pdf>
 51. IDSA. Diagnosis and Prevention of Periprosthetic Joint Infections (Endorsed). <https://www.idsociety.org/practice-guideline/periprosthetic-joint-infections/>
 52. Bradley JS, Byington CL, Shah SS, et al. The Management of Community-Acquired Pneumonia in Infants and Children Older Than 3 Months of Age: Clinical Practice Guidelines by the Pediatric Infectious Diseases Society and the Infectious Diseases Society of America. *Clinical Infectious Diseases*. 2011;53(7):e25-e76. doi:10.1093/cid/cir531
 53. ACOG. Prevention of Group B Streptococcal Early-Onset Disease in Newborns. 2020;
 54. Filkins L, Hauser J, Robinson-Dunn B, Tibbetts R, Boyanton B, Revell P. Guidelines for the Detection and Identification of Group B Streptococcus. Updated July 23, 2021. <https://asm.org/Guideline/Guidelines-for-the-Detection-and-Identification-of>
 55. NICE. Rapid tests for group A streptococcal infections in people with a sore throat. <https://www.nice.org.uk/guidance/dg38>
 56. HHS. Evaluation of Class III Designation--De Novo Request. https://www.accessdata.fda.gov/cdrh_docs/pdf13/k133883.pdf
 57. FDA. Product Classification. <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpd/classification.cfm?ID=3515>
 58. FDA. 510(k) Substantial Equivalence Determination Desion Summary (K183366). https://www.accessdata.fda.gov/cdrh_docs/reviews/K183366.pdf
 59. FDA. Groups A, C And G Beta-Hemolytic Streptococcus Nucleic Acid Amplification System. <https://www.accessdata.fda.gov/scripts/cdrh/devicesatfda/index.cfm?db=pmn&iid=K201269>

Policy Update History:

Approval Date	Effective Date; Summary of Changes
09/26/2025	01/03/2026; Document updated with literature review. The following changes were made to Reimbursement Information: Deleted #2; revised now #5 by removing (c); revised now #9 by removing (b); added code 876581; removed code 87040. References revised.
10/30/2024	01/15/2025; Document updated with literature review. The following changes were made to Reimbursement Information: Updated #6.a to include nucleic acid testing. Now reads: "a) As a follow-up test for individuals who have had either a bacterial culture test or a nucleic acid test for a streptococcal infection." References revised.
03/01/2024	03/01/2024: Document updated with literature review. The following changes were made to Reimbursement Information: Added For individuals with suspected acute rheumatic fever (ARF) or post-streptococcal glomerulonephritis (PSGN), the following testing may be reimbursable: a) Serological titer testing; b) Anti-streptolysin O immunoassay; c) Hyaluronidase activity or anti-hyaluronidase immunoassay; d) Streptokinase activity or anti-streptokinase immunoassay." "For all situations not described above, testing with an anti-streptolysin O immunoassay, a hyaluronidase activity or anti-hyaluronidase immunoassay, or a streptokinase activity or anti-streptokinase immunoassay is not reimbursable." Some edits made for clarity. References revised.
11/01/2023	11/01/2023: Document updated with literature review. Reimbursement Information revised for clarity only; no new information added. References revised.
11/1/2022	11/01/2022: New policy