



**SAN FRANCISCO  
HEALTH PLAN™**

*Here for you*

201 Third Street, 7<sup>th</sup> Floor \* San Francisco, CA 94103  
(415) 547-7818 ext. 400 \* FAX (415) 357-1292 \* [www.sfhp.org](http://www.sfhp.org)

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## Nuchal Translucency Screening Policy

Dear Community Health Network and University of California San Francisco Providers,

Please see the information below regarding coverage, authorization and payment for nuchal translucency screening in the first trimester of pregnancy for San Francisco Health Plan members belonging to Community Health Network medical group. Please note this is a NEW POLICY since Medi-Cal just clarified the nuchal translucency screening is a covered benefit, not a carve out.

### **San Francisco Health Plan (SFHP) Medi-Cal, Healthy Kids, Healthy Families and Healthy Workers**

Information for prenatal providers:

Nuchal translucency studies are a covered benefit under each SFHP program. For SFHP members belonging to the Community Health Network medical group, prenatal providers must obtain an authorization from the health plan prior to ordering the test and having the patient schedule an appointment at UCSF. Authorization requests should be faxed to **(415) 357-1292**. All requests will be authorized and an authorization is required to match the authorization against the claim and ensure reimbursement. SFHP should be billed directly.

Information for diagnostic imaging providers:

San Francisco Health Plan is responsible for authorizing requests for nuchal translucency studies. Please make sure SFHP members have an approved authorization on file before providing services. Diagnostic imaging providers should direct requests for reimbursement to the San Francisco Health Plan Claims Department. SFHP should be billed directly.

### **Healthy San Francisco**

Healthy San Francisco participants assigned to a DPH or SFCCC medical home: for more information about nuchal translucency services, authorization or payment, contact SFGH UM department at (415) 206-8557 or the government-sponsored program responsible for pre-natal care (e.g. AIM).