

CHAMPVA POLICY MANUAL

CHAPTER: 2
SECTION: 21.3
TITLE: MATERNAL SERUM ALPHA-FETOPROTEIN (AFP) AND MULTIPLE
MARKER SCREEN

AUTHORITY: 38 USC 1713; 38 CFR 17.270(a) and 17.272(a)

RELATED AUTHORITY: 32 CFR 199.4(e)(16)

TRICARE POLICY MANUAL: Chapter 5, Section 4.1

I. EFFECTIVE DATE

March 7, 1990

II. PROCEDURE CODE(S)

82105-82106, 82677, 84702

III. DESCRIPTION

A routine maternal screening test offered between 15-24 weeks of gestation.

IV. POLICY

The test is cost-shared separately (outside the global fee) as part of the maternity care benefit to predict fetal developmental abnormalities as well as purely genetic defects. AFP also may include Chorionic Gonadotropin (HCG), CPT code 84702, and unconjugated Estriol (UE3).

END OF POLICY