



State of New Mexico
Medical Assistance Program Manual
Supplement



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TO: SCHOOL BASED HEALTH SERVICES CLINICS, NON-PROFIT CLINICS,
AND FAMILY PLANNING CLINICS PARTICIPATING IN THE NEW
MEXICO MEDICAID PROGRAM

FROM: CAROLYN INGRAM, DIRECTOR

THROUGH: ROBERT STEVENS, BUREAU CHIEF, BENEFITS BUREAU

BY: JULIE MCKEAY, PHARMACY PROGRAM ADMINISTRATOR

**SUBJECT: MEDICAID REIMBURSEMENT FOR BIRTH CONTROL & FAMILY
PLANNING SERVICES**

This supplement provides instructions to school based health centers, licensed treatment & diagnostic clinics, and family planning clinics for billing for birth control, family planning, and emergency contraception drugs and items prescribed and dispensed by the clinic or center.

Effective for dates of service beginning February 1, 2008, the Medical Assistance Division Program, through its fiscal agent, ACS, will reimburse school based health centers, licensed treatment & diagnostic centers, and family planning clinics who are licensed by the New Mexico Pharmacy Board to dispense drug items for contraception and family planning agents when dispensed to a Medicaid recipient who was seen at the facility.

The recipient must be eligible for Medicaid and enrolled in the Medicaid fee-for-service program. If a recipient is enrolled in a SALUD! managed care program, the facility must contact the specific managed care organization regarding billing for these drug items and devices.

These services are billed on the CMS1500 form using the HCPC codes indicated below. Facilities will now have the option of actually dispensing the item to the recipient rather than writing a prescription for the recipient to take elsewhere. However, the facility should take into account the recipient's convenience and preference to ensure the best access to these family planning drugs and devices. In some instances, recipients may prefer to have a prescription to take to the pharmacy of their choice.

Reimbursement for these items is in addition to professional services the provider is already allowed to bill using CPT codes. Facilities should consult their CPT code book for other medical and surgical procedure codes related to contraceptive implant insertion and removal, intrauterine device insertion, and removal and any other contraceptive related procedures.

HCPC Codes and Descriptions

CODE	DESCRIPTION	BILLING UNITS	REIMBURSEMENT PER UNIT
A4261	Cervical cap for contraceptive use	1 unit for each cap	\$46.65
A4266	Diaphragm for contraceptive use	1 unit for each diaphragm	\$29.90
A4267	Condom, male	1 unit for each condom	\$0.40
A4268	Condom, female	1 unit for each condom	\$2.02
A4269	Spermicidal agent	1 unit for each container	\$3.00
J1055	Medroxyprogesterone acetate for contraceptive use (use for DEPO-PROVERA®)	1 unit for each 150mg	\$58.12
J1056	Medroxyprogesterone acetate with estradiol cypionate 5mg/25mg (use for LUNELLE® syringe or 0.5ml vial)	1 unit for each monthly dose	\$22.88
J7300	Intrauterine Copper Contraceptive (use for PARAGARD T380A®)	1 unit for each IUD	\$377.00
J7302	Levonorgestrel-releasing intrauterine contraceptive system (use for MIRENA®)	1 unit for each IUD	\$585.89
J7303	Hormone Containing Vaginal Ring (use for NUVARING®)	1 unit for each ring	\$42.36
J7304	Hormone Containing Patch (use for ORTHO EVRA®)	1 unit for each patch	\$18.20
S0180	Etonogestrel contraceptive implant system including implants and supplies (use for IMPLANON®)	1 unit for each system	\$653.75
S4993	Birth Control Pills	1 unit for a month supply	\$23.30

S4989	IUD other than above (use for PROGESTACERT®)	1 unit for each IUD	\$627.38
J8499 U1 <u>use with modifier U1</u>	PLAN B® or similar emergency contraception (The code is for “prescription drug, oral, non-chemotherapy” - the U1 modifier must be used to identify the item as emergency contraception.)	1 unit for each container (for example, one Plan B container consists of two tablets)	\$33.70

Billed Charges

The provider must bill not more than their usual and customary price to the general public.

Time spent by the health professional instructing or consulting with the recipient as well as other professional healthcare services are to be included in the professional charges, not in the cost of the contraceptive item.

Reimbursement will be made at the lesser of the provider’s billed charge or the medical assistance division (MAD) fee schedule or allowed payment for the item.

Questions regarding this supplement should be directed to Tonya Pamatian at the Medical Assistance Division, HSD (505) 827-3165.

Thank you. We appreciate your participation in the Medical Assistance Program.