243.500 Contraception

5-1-17<u>12-</u> 01-21

- A. Prescription and Non-Prescription Contraceptives
 - 1. Medicaid covers birth control pills and other prescription contraceptives as a family planning prescription benefit.
 - 2. Medicaid covers non-prescription contraceptives as a family planning benefit when a physician writes a prescription for them.
- B Etonogestrel (Ccontraceptive) Implant Systems
 - 1. Medicaid covers the <u>etonogestrel_</u>contraceptive implant system<u>s</u>, including implants and supplies.
 - 2. Medicaid covers insertion, removal and removal with reinsertion.
- C. Intrauterine Device (IUD)
 - 1. Medicaid pays for IUDs as a family planning prescription benefit.
 - 2. Alternatively, Medicaid reimburses physicians that supply the IUD at the time of insertion.
 - 3. Medicaid pays physicians for IUD insertion and removal.
- D. Medroxyprogesterone Acetate

Medicaid covers medroxyprogesterone acetate injections for birth control.

E. Sterilization

- 1. All adult (21 or older) male or female Medicaid beneficiaries who are mentally competent are eligible for sterilization procedures as long as they remain Medicaid-eligible.
- 2. Medicaid covers Occlusion by Placement of Permanent Implants. Coverage includes the procedure, the implant device and follow-up procedures as specified in Section 292.553.
- 3. Refer to Section 251.290 of this manual for Medicaid policy regarding sterilization.
- 4. Refer to Sections 292.550 through 292.553 of this manual for family planning procedure codes and billing instructions for family planning services.

TOC Required

216.513 Contraception

12-18-15<u>12-</u> 01-21

A. Prescription and Non-Prescription Contraceptives

- 1. Medicaid covers birth control pills and other prescription contraceptives as a family planning prescription benefit.
- 2. Medicaid covers non-prescription contraceptives as a family planning benefit when a physician writes a prescription for them.

B <u>Etonogestrel (contraceptive)Contraceptive</u> Implant Systems

- Medicaid covers the etonogestrel contraceptive implant systems, including implants and supplies. However, the Arkansas Medicaid family planning Aid Category 69 (FP-W) does not cover this device. However, Medicaid covers the removal of this device.
- 2. Medicaid covers insertion, removal and removal with reinsertion.

C. Intrauterine Device (IUD)

- 1. Medicaid pays for IUDs as a family planning prescription benefit.
- 2. Alternatively, Medicaid reimburses hospitals that supply the IUD at the time of insertion.
- 3. Medicaid pays hospitals for IUD insertion and removal.
- 4. Outpatient Global Surgery rules apply. See Section 272.160.

D. Medroxyprogesterone Acetate

Medicaid covers medroxyprogesterone acetate injections for birth control.

E. Sterilization

- All adult (21 or older) male or female Medicaid beneficiaries who are mentally competent are eligible for sterilization procedures as long as they remain Medicaideligible.
- 2. Medicaid covers Occlusion by Placement of Permanent Implants. Coverage includes the procedure, the implant device and follow-up procedures as specified in Section 216.515.
- 3. Refer to Section 216.514 of this manual for Medicaid policy regarding sterilization.
- 4. Refer to Sections 216.100, 216.130-216.132, 216.510-216.515, and 216.540-216.550 of this manual for family planning procedure codes and billing instructions for family planning services.

Certified Nurse-Midwife Section II

TOC Required

215.250 Contraception

10-1-15<u>12</u>-01-21

- A. Prescription and Non-Prescription Contraceptives
 - 1. Medicaid pays for birth control pills and other prescription contraceptives as a family planning prescription benefit.
 - 2. Medicaid pays for non-prescription contraceptives as a family planning benefit, when a certified nurse-midwife writes a prescription for them.
- B. Etonogestrel (contraceptive)Contraceptive Implant Systems
 - 1. Medicaid covers the etonogestrel contraceptive implant systems, including implants and supplies.
 - 2. Medicaid covers insertion, removal and removal with reinsertion.
- C. Intrauterine Devices (IUDs)
 - 1. Medicaid pays for IUDs as a family planning prescription benefit.
 - 2. Alternatively, Medicaid reimburses physicians, nurse practitioners, certified nurse-midwives and clinics who supply the IUD at the time of insertion.
 - 3. Medicaid pays physicians, nurse practitioners, certified nurse-midwives and clinics for IUD insertion and removal.
- D. Medroxyprogesterone Acetate
 - Medicaid covers medroxyprogesterone acetate injections for birth control.

Nurse Practitioner Section II

TOC Required

214.333 Contraception

1-15-16<u>12</u> 01-21

A. Prescription and Non-Prescription Contraceptives

- 1. Medicaid covers birth control pills and other prescription contraceptives as a family planning prescription benefit.
- 2. Medicaid covers non-prescription contraceptives as a family planning benefit when a physician writes a prescription for them.
- B <u>Etonogestrel (contraceptive)Contraceptive</u> Implant Systems.
 - 1. Medicaid covers the etonogestrel contraceptive implant systems, including implants and supplies.
 - 2. Medicaid covers insertion, removal and removal with reinsertion.
- C. Intrauterine Device (IUD)
 - 1. Medicaid pays for IUDs as a family planning prescription benefit.
 - 2. Alternatively, Medicaid reimburses physicians that supply the IUD at the time of insertion.
 - 3. Medicaid pays physicians for IUD insertion and removal.
- D. Medroxyprogesterone Acetate

Medicaid covers medroxyprogesterone acetate injections for birth control.

E. Sterilization

- All adult (21 or older) male or female Medicaid beneficiaries who are mentally competent are eligible for sterilization procedures as long as they remain Medicaideligible.
- 2. Medicaid covers Occlusion by Placement of Permanent Implants. Coverage includes the procedure, the implant device and follow-up procedures as specified in Section 252.430.
- 3. Refer to Sections 252.430 through 252.431 of this manual for family planning procedure codes and billing instructions for family planning services.

Rural Health Clinic Section II

TOC Required

217.220 Other Contraceptive Methods

10-13-03<u>12-</u> 01-21

Additional contraceptive methods covered by Medicaid are:

- A. The Norplant System Contraceptive implant systems, their its implantations and removal,
- B. Intrauterine devices (IUD) and
- C. Depo-Provera injections



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM STATE ARKANSAS

ATTACHMENT 4.19-B Page 1v

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE

Revised:

October 1, 2014 December

<u>1, 2021</u>

4.c. Family Planning Services

Reimbursement is based on the lesser of the amount billed or the maximum Title XIX (Medicaid) charge allowed. State developed fee schedule rates are the same for both public and private providers.

1. The Title XIX (Medicaid) maximum for Family Planning services is <u>one hundred percent</u> (100%) of the current physician Medicaid maximum.

At the beginning of each calendar year, the State Agency will negotiate with the affected provider group representatives to arrive at a mutually acceptable increase or decrease from the maximum rate. Market forces, such as private insurance rates, medical and general inflation figures, changes in practice costs and changes in program requirements, will be considered during the negotiation process. Any agreed upon increase or decrease will be implemented at the beginning of the following State Fiscal Year, July 1, with any appropriate State Plan changes.

2. Intrauterine Devices (IUDs) and Long-Acting Reversible Contraceptives (LARCs)

Effective for claims with dates of service January 1, 2014 and after, the intrauterine device (IUD) is reimbursed based on <u>one hundred percent (100%)</u> of the manufacturer's list price as of April 15, 2011. Effective for claims with dates of service October 1, 2014 and after, the <u>fifty-two milligrams (52)</u> mg Levon<u>orgestrel-Releasing Intrauterine Contraceptive System is reimbursed based on <u>one hundred percent (100%)</u> of the manufacturer's list price as of November 18, 2013. Effective for claims with dates of service October 1, 2014 and after, the 13.5 mg Levon<u>orgestrel-Releasing Intrauterine Contraceptive System is reimbursed based on <u>one hundred percent-(100%)</u> of the manufacturer's list price as of January 1, 2013.</u></u>

Effective for claims with dates of service December 1, 2021, and after, the reimbursement of all Food and Drug Administration approved -Long-Acting Reversible Contraceptives (LARCs) to include the IUD and contraceptive implants will be based on Wholesale Acquisition Cost as of December 1, 2021. Reimbursement will also apply to replacement of LARCs per manufacturer recommendations, or sooner if medically necessary.