

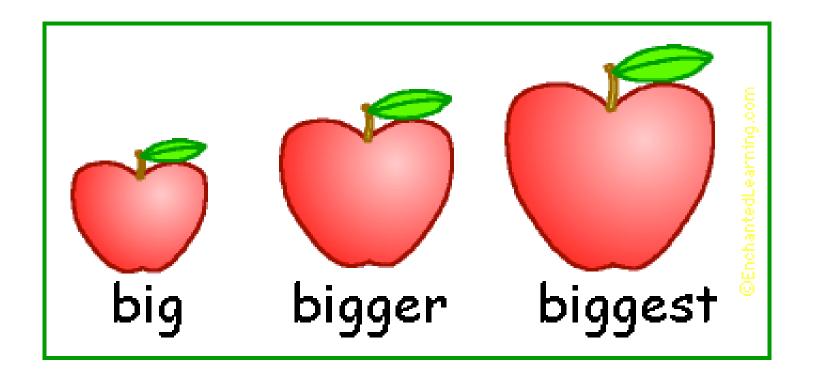


**NC Department of Health and Human Services** 

# Family Planning Program Updates

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# Changes to Family Planning Medicaid BISUUIUG MEDICAID

# FP Medicaid or "Be Smart" Program

The Family Planning Medicaid Program or "Be Smart" program is designed to reduce unintended pregnancies and improve the well-being of children and families in North Carolina. Family planning, reproductive health and contraceptive services are provided to eligible men and women, whose income is at or below 195% of the federal poverty level, with no age restrictions.

## Who Can Apply for "Be Smart"?

Eligible individuals whose income is at or below 195% of the federal poverty level and who are:

- U.S. citizens, documented immigrants or qualified aliens;
- Residents of North Carolina;
- Not incarcerated; and
- Not pregnant.

They will not qualify if they are eligible for another Medicaid program.

## **What Services Are Covered?**

- Preventive annual exam and six inter-periodic office visits (including counseling, patient education, and treatment)
- Specific laboratory procedures (i.e., pap tests, pregnancy tests)
- FDA-approved and Medicaid-covered birth control methods, procedures, pharmaceutical supplies, and devices
- Screening for HIV (Human Immunodeficiency Virus)
- Screening and treatment for specific Sexually Transmitted Infections (STIs)
- Voluntary male and female sterilization (in accordance with federal sterilization guidelines)
- Non-emergency medical transportation, as needed, to and from family planning appointments

# 1E-7, Family Planning Services Policy Updates

- NC Medicaid issued permanent updates to the 1E-7,
   Family Planning Services Policy for "Be Smart" Family
   Planning Medicaid (MAFDN) beneficiaries on December
   1, 2020. Some of these include:
  - Telehealth services for Established Patient Evaluation and Management (CPT codes 99211-99215) and Consultation Services (CPT codes 99241-99245).
  - US Preventive Services Task Force (USPSTF) Recommendations.
  - Referral guidelines for interventions in HIV by prophylactic prescription meds through Ready, Set PrEP program.

#### SOURCE:

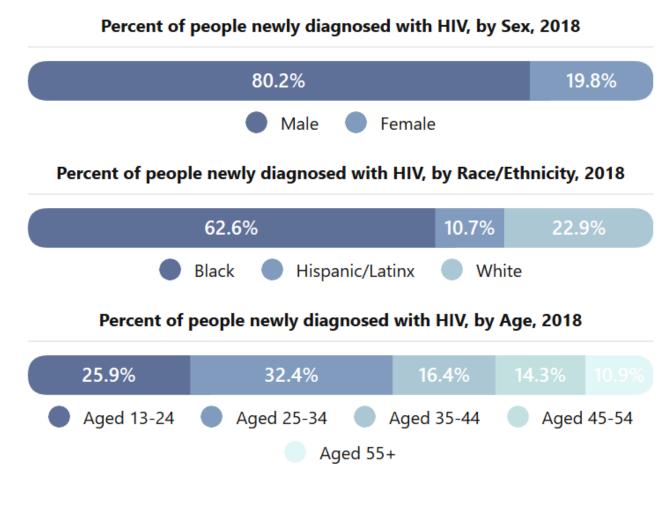
# 1E-7 Family Planning Services Policy Permanent Updates

- Clarification in policy for FQHC and RHC providers:
  - Family Planning services other than those provided to "Be Smart" (MAFDN) beneficiaries are billed as core service.
  - The core service code T1015 is not allowed with "Be Smart" Family Planning program services. Evaluation and Management and Preventive Service CPT codes should be billed.

#### **New HIV Diagnoses**

Number of new HIV diagnoses, 2018 **1,187** 

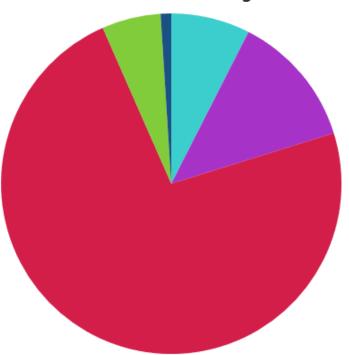
Rate of new HIV diagnoses per 100,000 population, 2018

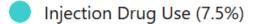


#### PEOPLE LIVING WITH HIV, BY TRANSMISSION CATEGORY, 2018

#### Percent of People Living with HIV, by Transmission Category, 2018

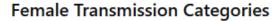


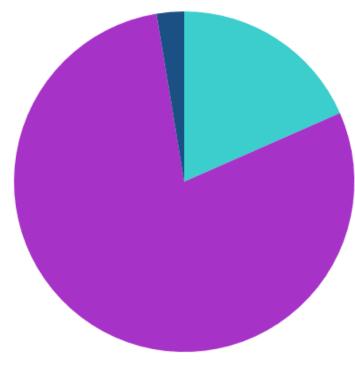






- Male-to-Male Sexual Contact (73.2%)
- Male-to-Male Sexual Contact & Injection Drug Use (5.6%)
- Other\* (1.0%)





- Injection Drug Use (18.4%)
- Heterosexual Contact (79.0%)
- Other\* (2.6%)

# 1E-7 Family Planning Services Policy Updates

- NC Medicaid added coverage for the following services for "Be Smart" Family Planning Medicaid (MAFDN) beneficiaries:
  - Total Salpingectomy procedure (CPT 58661)
  - NAAT diagnostic testing for Trichomonas Vaginalis (CPT 87661)
  - NAAT diagnostic testing for Mycoplasma Genitalium (CPT 87563) and treatment medication Moxifloxacin
  - Kyleena IUD (CPT J7296)
  - Scabies diagnostic testing (CPT 87220)
  - Amines vaginitis screening (CPT 82120)
  - Comprehensive Metabolic Panel (CPT 80053)
  - Added pertinent diagnosis codes for services added.

#### SOURCE:

# **Sterilization Bulletin Updates**

- Must be 21 years of age when they sign the consent form.
- Consent must be obtained at least 30, but not more than 180, consecutive days prior to the date of the sterilization, except under the following circumstances:
  - Premature Delivery: Informed consent must have been given at least 30 consecutive days before the expected date of delivery (EDD), and at least 72 hours must have passed since the informed consent was given.
  - Emergency Abdominal Surgery: At least 72 hours must have passed since the informed consent was given.

# **Sterilization Bulletin Updates**

- CMS did NOT extend the 180-day signature requirement
- Recommend that you resign them if you are 150 days post-signature
- Must use the FP modifier

Medicaid and Health Choice Clinical Coverage Policy No: 1E-3 Amended Date: August 15, 2020

# Sterilization 'Types of Operation'

Abbreviation	Written Wording	CPT Code(s)
PBS	Prophylactic Bilateral Salpingectomy	<mark>58661,58700</mark>
BPS	Bilateral Partial Salpingectomy	58600, 58661, 58670, 58700
BTF	Bilateral Tubal Fulguration	58670
BTS	Bilateral Tubal Sterilization	58600, 58605, 58611, 58615, 58661,58670, 58671, 58700
BTC	Bilateral Tubal Cauterization	58670
BTL	Bilateral Tubal Ligation	58600, 58605, 58611. 58615, 58671
BPPS	Bilateral Postpartum Sterilization	58611, 58605
PPBTL	Postpartum Bilateral Tubal Ligation	58611, 58605
LTC	Laparoscopic Tubal Cautery	58670

## What Is On The Horizon?

- Extending the number of oral contraceptive refills that can be dispensed from 3 to 12 months
- Following potential changes at the federal level to extend post-partum coverage to one year post delivery
- What program changes need to be made to allow auto enrollment from Medicaid for Pregnant Women (FPL 196%) to the Family Planning Medicaid Program (FPL 195%)?

### Resources

- Provider/Stakeholder Request for Coverage Form link:
  - https://medicaid.ncdhhs.gov/providers/forms/providerstakeholder-request-coverage-form
- Be-Smart--Be-Ready-Fact-Sheet-for-Providers
- Medicaid and Health Choice Clinical Coverage Policy 1E-3 Sterilization Procedures, Amended August 15, 2020
- Medicaid and Health Choice Clinical Coverage Policy
   1E-7 Family Planning Services, Amended December 1,
   2020.

## **Questions?**

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