

Long-action Reversible Contraception (LARC), such as intrauterine devices and contraceptive implants, is a safe and highly beneficial contraceptive method.

- Highly effective method of contraception
- Highest continuation and satisfaction rates
- Can be used by most women
- Increased use may reduce unintended pregnancy rates

Effective January 1, 2016, the Health and Human Services Commission, (HHSC), implemented Medicaid benefit changes in an effort to increase access to and utilization of LARCs in Texas Medicaid.

LARC devices are available through both pharmacy and “buy and bill” medical benefits.

- Providers may obtain LARC products through the existing buy and bill process, which requires providers to purchase LARCs from wholesalers or other sources before obtaining reimbursement upon insertion of the device, and opting to receive reimbursement for LARC products as a clinician-administered drug.
 - Providers can order LARC devices directly from the manufacturer or through a third party distributor, and keep the device on-site in their general stock
 - When a patient requests a LARC method, the provider pulls from their on-site stock and can provide the service on the same day
 - Providers then bill for both the LARC device and the insertion
- Providers can prescribe and obtain LARC products that are on the Medicaid Program drug formularies from certain specialty pharmacies. The specialty pharmacy dispenses the LARC device to the provider, and the provider inserts the device. The [list of long-acting reversible contraception products](#) are on the Vendor Drug Program (VDP) website.
 - The pharmacy bills Medicaid for the device
 - The provider bills the MCO only for the insertion procedure
- Providers who prescribe and obtain LARC products through specialty pharmacies may return unopened and unused LARC products to the manufacturer’s third-party processor.

The [Texas LARC Toolkit](#) can assist with helping providers increase the availability of LARCs to all Texas women. The Toolkit offers suggestions and resources to support implementation of a policy to make LARCs available to women throughout the reproductive life cycle, including prior to the first pregnancy, during the postpartum period (both during the hospital stay and at the postpartum visit), and whenever family planning services are received.

FirstCare Health Plans reimburses hospitals, FQHCs, and RHCs for appropriately providing Medicaid-covered LARC devices in the same amount, duration, and scope as the Medicaid benefit requires.

Long Acting Reversible Contraception: Intrauterine Devices

1. Insertion of the LARC IUD

The IUD and the insertion of the IUD may be reimbursed using procedure codes J7296, J7297, J7298, J7300, J7301, and 58300.

Procedure codes J7296, J7297, J7298, J7300, and J7301 may be reimbursed when they are billed with one of the following diagnosis codes:

Diagnosis Codes							
Z30011	Z30013	Z30014	Z30018	Z3002	Z3009	Z302	Z3040
Z3041	Z3042	Z30430	Z30431	Z30432	Z30433	Z3049	Z308
Z309	Z9851	Z9852					

2. Removal of the LARC IUD

Procedure code 58301 may be reimbursed when an IUD is extracted from the uterine cavity. An office visit will not be reimbursed when billed on the same date of service as procedure code 58301.

Long Acting Reversible Contraception: Implantable Contraceptive Capsules

The contraceptive capsule and the implantation of the contraceptive capsule may be reimbursed using procedure code J7307. Providers must use modifier U8 when submitting claims for a contraceptive device purchases through the 340B Drug Pricing Program.

Procedure code 11981 may be reimbursed for the insertion of the contraceptive capsule when it is billed with a family planning diagnosis code.

Procedure code 11983 may be reimbursed for the removal with reinsertion of the contraceptive capsule when it is billed with a family planning diagnosis code. Progesterone-containing subdermal contraceptive capsules (Norplant) were previously used for birth control. Although subdermal contraceptive capsules are no longer approved by the Food and Drug Administration (FDA), the removal of the implanted contraceptive capsule may be considered for reimbursement with procedure code 11976 or 11982.

Hospital Reimbursement for Immediate Postpartum LARC

Effective January 1, 2016, hospitals may receive reimbursement for covered LARC devices in addition to the reimbursement for labor and delivery services when a LARC device is inserted immediately postpartum.

Immediately postpartum refers to:

- Insertion within 10-15 minutes of placental delivery for IUDs;
- Insertion prior to discharge for implantable contraceptive capsules.

Hospital/facility providers are required to submit an outpatient claim with the appropriate procedure code for the LARC device in addition to the inpatient claim for the delivery services.

FQHC and RHC Reimbursement for LARC

FQHCs and RHCs may receive reimbursement for covered LARC devices in addition to the encounter rate paid for the visit.