Family Planning (MHCP)

Policy Number: SC14P0024A4  Effective Date: January 5, 2015
Last Reviewed: January 1, 2016

POLICY UPDATES

<table>
<thead>
<tr>
<th>POLICY VERSION NUMBER</th>
<th>DATE</th>
<th>SUMMARY OF CHANGE(S)</th>
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<tbody>
<tr>
<td>Version 4</td>
<td>January 1, 2016</td>
<td>Deleted HCPCS codes were removed from the policy.</td>
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</tbody>
</table>

Table of Contents

- POLICY UPDATES ............................................................................................................. 1
- PAYMENT POLICY OVERVIEW ............................................................................................. 4
- PATIENT ELIGIBILITY CRITERIA ......................................................................................... 4
- DEFINITIONS ..................................................................................................................... 4
- POLICY AND BILLING INFORMATION .................................................................................. 6
  - General Information ....................................................................................................... 6
  - Covered Services ............................................................................................................ 6
  - Non-Covered Services ..................................................................................................... 6
  - Legislated Increases in Payment ................................................................................... 6
- PRIOR AUTHORIZATION OR THRESHOLD LIMITS ................................................................ 7
- RELATED PAYMENT POLICY DOCUMENTATION .................................................................. 7
- REFERENCES AND SOURCE DOCUMENTS ............................................................................. 7

“Payment Policies assist in administering payment for UCare benefits under UCare’s health benefit plans. Payment Policies are intended to serve only as a general reference resource regarding UCare’s administration of health benefits and are not intended to address all issues related to payment for health care services provided to UCare members. In particular, when submitting claims, all providers must first identify member eligibility, federal and
state legislation or regulatory guidance regarding claims submission, UCare provider participation agreement contract terms, and the member-specific Evidence of Coverage (EOC) or other benefit document. In the event of a conflict, these sources supersede the Payment Policies. Payment Policies are provided for informational purposes and do not constitute coding or compliance advice. Providers are responsible for submission of accurate and compliant claims. In addition to Payment Policies, UCare also uses tools developed by third parties, such as the Current Procedural Terminology (CPT®*), InterQual guidelines, Centers for Medicare and Medicaid Services (CMS), the Minnesota Department of Human Services (DHS), or other coding guidelines, to assist in administering health benefits. References to CPT or other sources in UCare Payment Policies are for definitional purposes only and do not imply any right to payment. Other UCare Policies and Coverage Determination Guidelines may also apply. UCare reserves the right, in its sole discretion, to modify its Policies and Guidelines as necessary and to administer payments in a manner other than as described by UCare Payment Policies when necessitated by operational considerations."

*CPT® is a registered trademark of the American Medical Association
PAYMENT POLICY OVERVIEW

PRODUCT SUMMARY

The Family Planning Policy is applicable to individuals enrolled in one of UCare’s MHCP products.

PROVIDER SUMMARY

The following MHCP enrolled providers may provide some or all of the eligible family planning services (i.e., services and supplies):

- Certified nurse midwives
- Certified nurse practitioners
- Clinical nurse specialists
- Clinics
- Family planning Agencies
- Outpatient hospital departments
- Pharmacies
- Physician Assistants
- Physician

POLICY STATEMENT

The Family Planning Policy provides information regarding MHCP Family Planning services including eligible providers, defining covered services, and general billing and payment guidelines. In addition, the Policy outlines legislated payment increases for specific services when performed by an eligible community clinic.

PATIENT ELIGIBILITY CRITERIA

All individuals enrolled in an UCare MHCP product, except Emergency Medical Assistance (EMA) recipients of childbearing age, including minors are eligible to received family planning services.

DEFINITIONS

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<tr>
<th>TERM</th>
<th>NARRATIVE DESCRIPTION</th>
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<tbody>
<tr>
<td>Community Clinic</td>
<td>For purposes of this Policy a Community Clinic means a:</td>
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<td></td>
<td>1. Nonprofit clinic that is established to provide health services to low income or rural population groups; provides medical, preventive, dental, or mental health primary care services; and utilizes a sliding fee scale or</td>
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### Definitions

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<tr>
<th>TERM</th>
<th>NARRATIVE DESCRIPTION</th>
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<tr>
<td>other procedure to determine eligibility for charity care or to ensure that no person will be denied services because of inability to pay; 2. Governmental entity or an Indian tribal government or Indian health service unit that provides services and utilizes a sliding fee scale or other procedure as described under clause (1); 3. Consortium of clinics comprised of entities under clause (1) or (2); or 4. Nonprofit, tribal, or governmental entity proposing the establishment of a clinic that will provide services and utilize a sliding fee scale or other procedure as described under clause (1).</td>
<td><strong>Note:</strong> Definition is referenced in 256B.764 and can be found in Minnesota Statute 145.9268, subd.1 Based on clarification from DHS, this Policy is applicable to:  - Community Mental Health Centers  - Child and Teen Check-Up Clinics,  - Family Planning Agencies  - Public Health Clinics  - Public Health Nursing Organizations  - Indian Health Facilities  - FQHCs and Rural Health Clinics (with the exclusion of some major programs)</td>
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<td>Family Planning Agency</td>
<td>Means an entity having a medical director that provides family planning services under the direction of an MHCP-enrolled physician. The medical director must ensure that the counseling and information about family planning are performed by trained personnel and according to accepted community standards.</td>
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<tr>
<td>Family Planning Service</td>
<td>Means screening, testing, and counseling for sexually transmitted diseases when provided in conjunction with the voluntary planning of conception and childbearing.</td>
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POLICY AND BILLING INFORMATION

General Information
- Copayments are not applied to family planning services.

Covered Services
Outlined below is a general description of covered family planning services:

- Consultation, examination, and medical treatment
- Contraceptive devices (e.g., diaphragm, intrauterine devices)
- Contraceptive injections (e.g., Depo-Provera)
- Emergency contraception (e.g., Plan B)
- Family planning counseling
- Family planning supplies (e.g., condoms, thermometers)
- Genetic Counseling
- HIV blood screening and counseling, before and after HIV blood screening test
- Infertility services, limited to diagnosis and treatment of medical problems causing infertility (e.g., pituitary or ovarian tumor, testicular mass)
- Laboratory examination and tests, including screening for cervical cancer by pap smear and pregnancy testing as clinically indicated
- Prescriptions for the purpose of family planning
- Testing of sexually transmitted infections (STIs)
- Treatment of non-HIV related sexually transmitted infections
- Voluntary sterilization

Non-Covered Services
- Artificial insemination, including in vitro fertilization
- Fertility drugs and all associated services
- Reversal of voluntary sterilization

Legislated Increases in Payment
The list of services eligible for an increase is published by MHCP and may be updated from time to time. The most current list of eligible services can be found at:
Based on clarification from DHS, legislated rate increases will be applied when an eligible provider furnishes services at one of the following entities:

- Community Mental Health Centers
- Child and Teen Check-Up Clinics
- Family Planning Agencies
- Public Health Clinics
- Public Health Nursing Organizations
- Indian Health Facilities
- FQHCs and Rural Health Clinics (with the exclusion of some major programs)

**PRIOR AUTHORIZATION OR THRESHOLD LIMITS**

Not Applicable

**RELATED PAYMENT POLICY DOCUMENTATION**

**REFERENCES TO OTHER PAYMENT POLICY DOCUMENTATION THAT MAY BE RELEVANT TO THIS POLICY.**

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<thead>
<tr>
<th>POLICY NUMBER</th>
<th>POLICY DESCRIPTION AND LINK</th>
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**REFERENCES AND SOURCE DOCUMENTS**

**LINKS TO CMS, MHP, MINNESOTA STATUTE AND OTHER RELEVANT DOCUMENTS USED TO CREATE THIS POLICY.**

*MHCP Provider Manual – Reproductive Health OB-GYN – Family Planning*

http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_137811#

*MHCP Provider Manual – Reproductive Health OB-GYN – Minnesota Family Planning Program (For List of Codes)*
MN9505.0280 Family Planning
https://www.revisor.mn.gov/rules/?id=9505.0280

MS 256B.764 Reimbursement of Family Planning Services
https://www.revisor.mn.gov/statutes/?id=256B.764&year=2013&keyword_type=all&keyword=family+planning

MS 145.9268, subd.1 Community Clinic Grants, Used for Definition of Community Clinic as Referenced in 256B.764
https://www.revisor.mn.gov/statutes/?id=145.9268

MHCP Family Planning Codes with Increased Rates, July 2014