

August 18, 2020

Aetna Better Health® of Kansas

Clinical Payment, Coding and Policy Changes

We regularly augment our clinical, payment and coding policy positions as part of our ongoing policy review processes. In an effort to keep our providers informed, please see the below communication of upcoming new policies.

Effective for dates of service beginning 11/1/2020:

Intrauterine Contraceptive Systems and Implants

According to the KDHE Long Acting Reversible Contraceptive (LARC) Integration Toolkit the following guidelines should be followed:

- Etonogestrel implant system (Nexplanon – J7307) including implant and supplies should be billed with diagnosis codes indicating Pregnancy Prevention (ICD-10 codes Z30.014, Z30.017, Z30.430, Z30.433, Z30.46). An implant or insertion code (11981 or 11983) should be billed same day by the same provider.
- Levonorgestrel-releasing intrauterine contraceptive systems:
 - Mirena, 52mg (J7298) should be billed with diagnosis codes indicating Pregnancy Prevention (ICD-10 codes Z30.014, Z30.017, Z30.430, Z30.433, Z30.46).
 - Kyleena, 19.5mg (J7296) should be billed with diagnosis codes indicating Pregnancy Prevention (ICD-10 codes Z30.014, Z30.017, Z30.430, Z30.433, Z30.46)

- Litetta, 52mg (J7297) should be billed with diagnoses codes indicating Pregnancy Prevention (ICD-10 codes Z30.014, Z30.017, Z30.430, Z30.433, Z30.46)
- Skyla, 13.5mg (J7301) should be billed with diagnoses codes indicating Pregnancy Prevention (ICD-10 codes Z30.014, Z30.017, Z30.430, Z30.433, Z30.46)
- Intrauterine copper contraceptive (Paragard T 380A – J7300) s should be billed with diagnoses codes indicating Pregnancy Prevention (ICD-10 codes Z30.014, Z30.017, Z30.430, Z30.433, Z30.46)

Additional information:

Insertion of intrauterine device (58300) should be billed on the same day by the same provider when billing J7296 (Kyleena), J7297 (Litetta), J7298 (Mirena), J7300 (Paragard) or J7301 (Skyla).

J7296 (Kyleena), J7297 (Litetta), J7298 (Mirena), J7300 (Paragard) or J7301 (Skyla) should only be billed every three years, except when the intrauterine device removal (58301) has been billed for the same date of service, or within the previous three years.