BUY AND BILL GUIDE FOR IUDS AND IMPLANTS

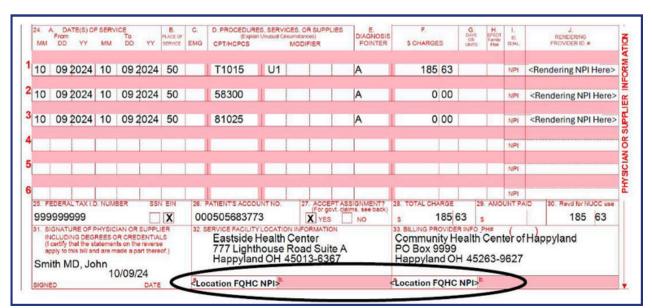
How encounter rate clinics can sustainably offer and get reimbursed for Long Acting Reversible Contraceptives (LARCs) in Illinois.

What is buy and bill?

Buy and bill is the practice of making an upfront purchase of contraceptive devices (hormonal IUD, copper IUD, arm implant) and billing each device as you use it as a medical benefit. Per HFS guidance, Illinois MCOs no longer cover the cost of LARCs as a pharmacy benefit so establishing buy and bill **not only helps ensure you will get reimbursed, it also helps reduce patient financial barriers to their birth control of choice and supports same-day access.** When establishing buy and bill, we recommend buying no more than 5 of each device to get started and then reassessing after a few months to maintain an appropriate supply based on utilization trends and demand.

What is a carve out?

In Illinois, LARCs are "carved out" from your health centers encounter rate. This means that when FQHC/RHCs purchase LARCs, the clinic **can bill for the device fee-for-service, separate from the encounter rate**. LARC charges must be submitted separately from the encounter. Medical claims must be submitted with the encounter rate CPT code of T1015 listed in the first service line of the claim, along with the clinic's assigned encounter rate. The CPT codes for the services rendered must then be listed in the remaining service lines as detail codes. The detail codes will be reimbursed at \$0.00.





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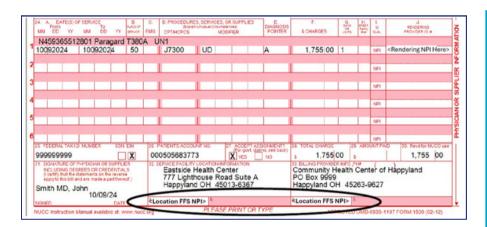
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How do I bill separately for LARC devices?

Devices (J codes) should be billed on a separate encounter from the visit. Providers are not to bill with encounter rate code T1015 when submitting claims for these devices. When billed directly to HFS and to the extent that the LARCs were purchased under the 340B Drug Pricing Program, the device must be billed at the FQHC's <u>actual acquisition cost (AAC</u>) with a UD modifier.

What is a UD modifier?

The UD modifier provides a \$35.00 dispensing fee when billed with methods purchased through the 340B federal Drug Pricing Program, including for Medicaid MCOs. Your health center should determine rates based on your MCO contract, plan specific fee schedules, or usual and customary rates for the local market making certain the charge exceeds anticipated third-party payer payments. Ultimately charge setting is at the discretion of each health center.



IUD CPT and ICD Codes :

Procedures:

- 58300 Insertion of IUD
- 58301 Removal of IUD

Encounters:

- Z30.014 Initial Rx/counseling for IUD, excluding insertion
- Z30.430 Encounter for insertion of IUD
- Z30.431 Encounter for routine checking of IUD
- Z30.432 Encounter for removal of IUD
- Z30.433 Encounter for removal and reinsertion of IUD

Hormonal IUDs:

- J7296 Levonorgestrel-releasing intrauterine contraceptive system (Kyleena®), 19.5 mg (5 year duration)
- J7297 Levonorgestrel-releasing intrauterine contraceptive system (Liletta®), 52 mg (8 year duration)
- **J7298** Levonorgestrel-releasing intrauterine contraceptive system (Mirena®), 52 mg (8 year duration)
- J7301 Levonorgestrel-releasing intrauterine contraceptive system (Skyla®), 13.5 mg (3 year duration)

Copper IUDs:

• **J7300** - Intrauterine copper contraceptive (Paragard®) (12 year duration)

Arm Implant:

• **J7307** - Etonogestrel implant system, including implant and supplies

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Implant CPT and ICD Codes :

Procedures:

- 11981 Insertion, non-biodegradable drug delivery implant
- 11982 Removal, non-biodegradable drug delivery implant
- 11983 Removal with reinsertion, non-biodegradable drug delivery implant

Encounters:

- **Z30.017** Initial prescription and counseling for implantable subdermal contraceptive, *including insertion*
- **Z30.46** Surveillance of implantable subdermal contraceptive, including checking, reinsertion, or removal.

340B Tips and Reminders

Upon enrollment in the 340B Program, a covered entity site must inform HRSA whether it will use 340B drugs for its Medicaid fee-for-service patients (carve-in), or whether it will purchase drugs for its Medicaid fee-for-service patients through other mechanisms (carve-out). *Ensure your entity's 340B registration status is checked as carve-in* so that Illinois Medicaid does not provide duplicate discounts. This can be done via <u>OPAIS</u> along with yearly recertification and any making any updates or changes to NPI/locations. 340B devices can be used for all covered entities' patients regardless of payor source as long as:

- (1) There is an established relationship, with care records maintained by the covered entity.
- (2) Receiving care from a professional employed by/under contract with the covered entity or other arrangement (e.g., referral for consultation) so that responsibility for care remains with the covered entity.
- (3) With respect to grantees and sub-grantees, must receive health services from the covered entity that are consistent with the services for which grant funding has been provided to the entity.

How should we track our 340B devices?

Tracking is important to show for 340B compliance and for monitoring coverage and reimbursement. We recommend a basic paper binder with a tracking form that bases the inventory ID on location and the number of devices. For example "LL-10105" may mean Lower Loop clinic and this is the 10105th LARC device.

340B LARC Inventory ID Number		Patient FULL Name	Patient ID	Patient DOB (MM/DD/YY)	Insurance	Provider	and the second se	insertion	If Self-pay or SFS, was payment made?
L	L-10105	Suzy A. Smíth	458236	05/11/1990	County Care MCO	Dr. Pepper	Mary McDonald	10/05/18	Amount Paid:
Lot # Exp Date	12753988								Insertion Complete?





Key Take Aways:

- Confirm that you are "carved-in" with OPAIS if you will use 340B LARCs for Medicaid patients.
- When billing traditional FFS Medicaid, use a UD modifier and bill at the actual acquisition cost (AAC).
- When billing MCO plans, use the UD modifier

Where can I purchase devicecs?

Most providers and patients are satisfied getting started with these three classes of devices. When you contact the vendor, please request a 340B purchasing account for access to 340B pricing.

<u>Cooper Surgical- Pargard copper IUD (Paragard Direct)</u> Jolanta Markiewicz, MS, APRN, CNM Clinical Specialist, Paragard 203-400-1192 / Jolanta.Markiewicz@coopersurgical.com

<u>Abbvie- Liletta progestin IUD</u> Kristen Feurer – Urology/Gynecology 847-997-0741 / kristen.feurer@abbvie.com

Organon -Nexplanon arm implant (Theracom)

Chicagoland Amy Draper - Executive Clinical Account Specialist 773-562-6971 / amy.draper@organon.com

Peoria and Bloomington Dawn H Eickenberg- Executive Clinical Account Specialist 847- 828-1518 / dawn.eickenberg@organon.com

Decatur, Springfield, Quincy, Champaign Urbana, Danville & South Pamela Striegel - Executive Clinical Account Specialist 618-531-7267 / pamela.striegel@organon.com

The HFS Family Planning Program

Health centers should have strong confidence about getting reimbursed with buy and bill because of Illinois' generous coverage for family planning and related services, including IUDs and Implants. This coverage is open to patients who live in Illinois and earn less than \$3,600/month including patients of:

- any age
- any gender
- any immigration status

Learn more by visiting ICAN's HFS Family Planning Program <u>provider page</u>.

Additional resources:

ICAN Billing and Coding Job Aid ICAN LARC Billing 20-minute microcourse IAMHP Billing Manual Encounter Rate Clinic Handbook, D=210.5.2 LARCs Buy and bill provider notice, issued 06/04/2021 ACOG LARC Billing Guide for TPL/Commercial Insurance OPAIS 340B User Guide Summary of 340B Basics

Still have questions?

ICAN! supports health centers to provide same-day access to all FDA-approved birth control methods without financial barriers to patients. Email us to learn more or request additional support on getting started with buy and bill at your health center.

ICAN! Program Director: Jordan Hatcher jhatcher@ican4all.org

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