

Incentives to Support High Quality Family Planning Services



Unintended Pregnancy

Almost half of pregnancies in the Inland Empire are unintended – either mistimed or unwanted. Unintended pregnancy is associated with adverse maternal and infant health outcomes, as well economic challenges at the family level. Over 90% of unintended pregnancies in the U.S. are attributable to women who do not use birth control or who use it incorrectly. Thus, access to high-quality family planning services – including contraception – is key to preventing unintended pregnancy and supporting healthy, growing families.

Incentives to Support Family Planning: Proposition (“Prop”) 56 Provider Payments

Effective July 1, 2019, Providers qualified to offer Department of Health Care Services (DHCS) or Medi-Cal family planning services may be eligible to receive supplemental Prop 56 payments for select family planning services. California has earmarked \$500 million of Prop 56 state funds for this program; as displayed in the table below, supplemental Provider payments are substantial. These services will be identified by the procedure coding submitted on your IEHP medical claims. These supplemental payments are **in addition to** IEHP’s Provider payment for the services. **IEHP will not begin processing these supplemental payments until the State Plan Amendment is approved by the Centers for Medicare and Medicaid Services (CMS).**

Providers currently utilizing a physician “buy and bill” process for LARC products AND submitting claims to IEHP with the correct procedure codes for both the LARC product and LARC insertion are eligible for supplemental Prop 56 payments. **Note: Federally Qualified Health Centers, Rural Health Clinics, and Indian Health Services sites are excluded.**

Family Planning Procedure Code	Description	Prop 56 Supplemental Payment Amount
J7296	LEVONORGESTREL-RELEASING IU COC SYS 19.5 MG	\$2,727
J7297	LEVONORGESTREL-RLS INTRAUTERINE COC SYS 52 MG	\$2,053
J7298	LEVONORGESTREL-RLS INTRAUTERINE COC SYS 52 MG	\$2,727
J7300	INTRAUTERINE COPPER CONTRACEPTIVE	\$2,426
J7301	LEVONORGESTREL-RLS INTRAUTERINE COC SYS 13.5 MG	\$2,271
J7307	ETONOGESTREL CNTRACPT IMPL SYS INCL IMPL & SPL	\$2,671
J3490U8	DEPO-PROVERA	\$340
J7303	CONTRACEPTIVE VAGINAL RING	\$301
J7304	CONTRACEPTIVE PATCH	\$110
J3490U5	EMERG CONTRACEPTION: Ulipristal acetate 30 mg	\$72
J3490U6	EMERG CONTRACEPTION: Levonorgestrel 0.75 mg & 1.5 mg	\$50
11976	REMOVE CONTRACEPTIVE CAPSULE	\$399
11981	INSERT DRUG IMPLANT DEVICE	\$835
58300	INSERT INTRAUTERINE DEVICE	\$673
58301	REMOVE INTRAUTERINE DEVICE	\$195
81025	URINE PREGNANCY TEST	\$6
55250	REMOVAL OF SPERM DUCT(S)	\$521
58340	CATHETER FOR HYSTEROGRAPHY	\$371
58555	HYSTEROGRAPHY DX SEP PROC	\$322
58565	HYSTEROGRAPHY STERILIZATION	\$1,476
58600	DIVISION OF FALLOPIAN TUBE	\$1,515

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Family Planning Procedure Code	Description	Prop 56 Supplemental Payment Amount
58615	OCCLUDE FALLOPIAN TUBE(S)	\$1,115
58661	LAPAROSCOPY REMOVE ADNEXA	\$978
58670	LAPAROSCOPY TUBAL CAUTERY	\$843
58671	LAPAROSCOPY TUBAL BLOCK	\$892
58700	REMOVAL OF FALLOPIAN TUBE	\$1,216

High-Quality Family Planning Services

“Family planning services” means more than just contraception. Beyond birth control counseling and provision, family planning services also include pregnancy testing and counseling, preconception care for those who wish to conceive, and testing/treatment for sexually transmitted infections (STIs). The U.S. Centers for Disease Control and Prevention (CDC) and Office of Population Affairs have identified characteristics of “high-quality” family planning services:

Safety	CDC medical eligibility criteria for contraceptive methods are integrated into services
Effectiveness	Counseling highlights the effectiveness of contraceptive methods
Client-centered approach	The client’s autonomy, needs, and preferences regarding contraceptive choices are respected; care is culturally competent
Timeliness	Services are timely (e.g., same-day initiation of selected method)
Efficiency	Efficient service delivery
Accessibility	Barriers to contraceptive use are removed
Equity	High-quality care is available to all clients
Value	Cost-effectiveness of methods is a consideration

Contacts:

For more information regarding this incentive program and providing family planning services to IEHP Members, please contact: **Provider Call Center: (909) 890-2054.**

References

Guttmacher Institute. (2017). State Facts About Unintended Pregnancy: California.

<https://www.guttmacher.org/fact-sheet/state-facts-about-unintended-pregnancy-california> Accessed 15 July 2019.

California Department of Public Health. (2014). 2012 Maternal and Infant Health Assessment (MIHA) County Report.

<https://www.cdph.ca.gov/Programs/CFH/DMCAH/MIHA/CDPH%20Document%20Library/MIHA-AnnualReport-2012-County.pdf> Accessed 15 July 2019.

U.S. Centers for Disease Control and Prevention (CDC). (2014). Providing Quality Family Planning Services:

Recommendations of CDC and the U.S. Office of Population Affairs. *Morbidity and Mortality Weekly Report*, 63(4), 1-54.

California Department of Health Care Services (DHCS). (2019). FY 2019-20 Proposition 56 Medi-Cal Family Planning Supplemental Payment Proposal.

https://www.dhcs.ca.gov/services/Documents/P56_MCal_FP_Proposal_May_Revision.pdf Accessed 15 July 2019

