

Common Codes for Billing - Contraceptive Management

Method <i>(NYS APG Claim Type)</i>	Procedure / Supply Codes	ICD-10	Description
Depo Provera <i>(APG with E/M / OA claim RN refill only; Charge = cost)</i>	E/M-25 */ injection (96372) / J1050 (report 104 / 150 units)	Z30.013	Initial prescription of injectable contraceptive
		Z30.42	Surveillance / refill of injectable contraceptive
EC <i>(APG)</i>	E/M * / (bill up to S4993 3 units)	Z30.012	Prescription of Emergency Contraception
Hormone Patch <i>(APG)</i>	E/M * / J7304 (report 1 unit)	Z30.016	Initial prescription of hormonal patch contraceptive
		Z30.45	Surveillance / refill of patch
Natural Family Planning <i>(APG)</i>	E/M *	Z30.02	Counseling and instruction in NFP to avoid pregnancy
OCP <i>(APG)</i>	E/M * / S4993 (bill up to 3 packs <u>initial</u> only)	Z30.011	Initial prescription of Oral Contraceptive Pills (OCP)
		Z30.41	Surveillance / refill of OCP (refill packs of OCP are not billable under APGs)
Vaginal Ring <i>(APG Visit + OA for rings at cost w units)</i>	E/M * / J7294 Anovera J7295 Nuvaring	Z30.015	Initial prescription of vaginal ring contraceptive
		Z30.44	Surveillance / refill of vaginal ring
Other Barrier Methods <i>(APG)</i>	E/M *	Z30.018	Initial prescription of other contraception (barrier, condom, diaphragm)
		Z30.49	Surveillance / refill of other contraception
FP Advice <i>(APG)</i>	E/M *	Z30.09	Encounter for other general counseling and advice on contraception <i>(~ no method dispensed, general method counseling before LARC insertion)</i>

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* E/M or other medical / counseling service

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LARC's (Long-Acting Reversible Contraception)			
Method (NYS APGs)	Procedure / Supply Codes	ICD-10	Description
IUD (APG for visit counseling and insertion; OA for device at acquisition cost)	58300 / J7296 Kyleena, J7297 Liletta, J7298 Mirena, J7300 ParaGard, J7301 Skyla	Z30.430	Insertion of IUD <i>(Bill device to a separate Ordered Ambulatory Fee claim at acquisition cost with 340B UD modifier and NDC)</i> <i>Note: Under APGs, the E/M pays in addition to the IUD procedures when billed on the same day/APG claim</i>
	E/M*	Z30.431	Routine Checking of IUD
	58301	Z30.432	Removal of IUD
	58300-59, 58301 See device codes above	Z30.433	Removal and Re-insertion of IUD <i>Note: Add modifier 51 (use 59 for NYS Medicaid) to lower paying procedure to ensure accurate payments for both services</i>
Implant (Nexplanon) (APG for visit, counseling and insertion; OA for device at acquisition cost)	11981 / J7307	Z30.017	Initial prescription / insertion of Nexplanon <i>(Bill device to a separate Ordered Ambulatory Fee claim at acquisition cost with NDC and 340B UD modifier if applicable)</i>
	11982 (Removal)	Z30.46	Encounter for routine checking, reinsertion or removal of Nexplanon <i>Note: New 2022: Under APGs, the E/M pays in addition to the Nexplanon procedures when billed on the same day/APG claim</i>
	E/M * (Checking)		
	11983 (Reinsertion) / J7307		

Append modifier 25 to an E/M if billed with a LARC procedure to indicate separate and distinct.

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