OVERVIEW
This policy documents the state mandated coverage guidelines for FDA-Approved Prescription Contraceptive Drugs and Devices (Rhode Island General Law 27-20-43).

This policy is applicable only to those plans that do not include Preventive Services.

MEDICAL CRITERIA
Not applicable

PRIOR AUTHORIZATION
Prior authorization review is not required.

POLICY STATEMENT
BlueCHiP for Medicare and Commercial Products
FDA-approved contraceptive drugs and devices that require a prescription are a covered benefit.

BlueCHiP for Medicare
Rhode Island mandated benefits generally do not apply to BlueCHiP for Medicare. In this policy, coverage is included for BlueCHiP for Medicare. While traditional Medicare does not cover contraceptives, in many instances BCBSRI policies offer more benefits than does Medicare. Oral contraceptives are covered under Medicare Part “D” benefits.

Emergency Contraception
Emergency contraception (EC), also known as back-up birth control and the morning after pill, is available at pharmacies (e.g., brand names Plan B and Next Choice).
- EC is covered for individuals 17 years of age and under and requires a prescription and will be covered under the member’s pharmacy benefit.
- EC is not covered for individuals 17 years of age and older as it is an over-the-counter (OTC) product.

Over-the-counter Contraceptive Supplies
All BCBSRI products deny coverage for foam, condoms, spermicidal cream/jelly, and sponges as they are over-the-counter purchases.

Note: Coverage of the drug known as RU486, also known as Mifeprex (generic name: mifepristone), is not required under the mandate. For information regarding coverage of RU486 for all lines of business, please refer to the Termination of Pregnancy policy.

COVERAGE
Benefits may vary between groups/contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for applicable contraceptive drugs and devices coverage/benefits.
Although Rhode Island mandated benefits generally do not apply to BlueCHiP for Medicare, FDA-approved contraceptive drugs and devices that require a prescription are covered for all BCBSRI members. Self-funded groups may or may not choose to follow state mandates.

**BACKGROUND**

This policy describes Rhode Island General Law 27-20-43, which requires that insurers provide coverage of FDA-Approved Prescription Contraceptive Drugs and Devices as stated below.

(a) Every individual or group health insurance contract, plan, or policy that provides prescription coverage and is delivered, issued for delivery, or renewed in this state shall provide coverage for F.D.A. approved contraceptive drugs and devices requiring a prescription. Provided that nothing in this subsection shall be deemed to mandate or require coverage for the prescription drug RU 486.

(b) Notwithstanding any other provision of this section, any medical service corporation may issue to a religious employer an individual or group health insurance contract, plan, or policy that excludes coverage for prescription contraceptive methods which are contrary to the religious employer’s bona fide religious tenets.

(c) As used in this section, “religious employer” means an employer that is a “church or a qualified church-controlled organization” as defined in 26 U.S.C. § 3121.

(d) Every religious employer that invokes the exemption provided under this section shall provide written notice to prospective enrollees prior to enrollment with the plan, listing the contraceptive health care services the employer refuses to cover for religious reasons.

(e) Beginning on the first day of each plan year after April 1, 2019, every health-insurance issuer offering group or individual health-insurance coverage that covers prescription contraception shall not restrict reimbursement for dispensing a covered prescription contraceptive up to three hundred sixtyfive (365) days at a time.

**FDA-Approved Prescription Contraceptive Drugs and Devices According to the Mandate:**

The above mandate requires insurers to cover FDA-approved drugs and devices for contraception that require a prescription. This mandate pertains to the following types of contraceptive drugs and devices:

- Intrauterine device (IUD)
- Hormonal-releasing IUD
- Vaginal contraceptive ring
- Diaphragm, cervical cap/shield
- Hormonal implant systems
- Injectable contraceptives
- Oral contraceptives
- Contraceptive patch

On August 1, 2011, the Department of Health and Human Services (HHS) adopted additional Guidelines for Women’s Preventive Services including:

- Well-woman visits,
- Support for breast-feeding equipment,
- Human papilloma virus screening,
- Contraception, and
- Domestic violence screening

All services listed above were covered without cost sharing in new health plans starting in August 2012. The guidelines were recommended by the independent Institute of Medicine (IOM) and based on scientific evidence. These changes were effective upon renewal on or after August 1, 2012.
The above Federal Law supersedes Rhode Island State Law as both laws specify coverage for contraception.

**CODING**
The following codes are covered for BlueCHiP for Medicare and Commercial Products:

- **11976** Removal, implantable contraceptive capsules
- **11981** Insertion, non-biodegradable drug delivery implant
- **57170** Diaphragm or cervical cap fitting with instructions
- **58300** Insertion of intrauterine device (IUD)
- **58301** Removal of intrauterine device (IUD)
- **A4261** Cervical cap for contraceptive use
- **A4266** Diaphragm for contraceptive use
- **J1050** Injection, medroxyprogesterone acetate, 1 mg
- **J7296** Levonorgestrel-releasing intrauterine contraceptive system, (kyleena), 19.5 mg
- **J7297** Levonorgestrel-releasing intrauterine contraceptive system, 52mg, 3 year duration (Liletta)
- **J7298** Levonorgestrel-releasing intrauterine contraceptive system, 52mg, 5 year duration (Mirena)
- **J7300** Intrauterine copper contraceptive
- **J7301** Levonorgestrel-releasing intrauterine contraceptive system, 13.5 mg (Skyla)
- **J7306** Levonorgestrel (contraceptive) implant system, including implants and supplies
- **J7307** Etonogestral (contraceptive) implant system, including implants and supplies

Rather than filing codes **S4981** and **S4989**, providers should file with the appropriate CPT or HCPCS J-code.

The following code is not separately reimbursed for all BCBSRI products:
- **A4264** Permanent implantable contraceptive intratubal occlusion device and delivery system

The following codes are covered under the Pharmacy Benefit for BlueCHiP for Medicare and Commercial Products:
- **S4993** Contraceptive pills for birth control (use alternate code)
- **J7303** Contraceptive supply, hormone containing vaginal ring, each
- **J7304** Contraceptive supply, hormone containing patch, each

**RELATED POLICIES**
Termination of Pregnancy
Preventive Services BlueCHiP Medicare
Preventive Services for Commercial Members

**PUBLISHED**
Provider Update, June 2019
Provider Update, March 2018
Provider Update, March 2017
Provider Update, March 2016
Provider Update, May 2015

**REFERENCES**
Rhode Island General Law (RIGL) 27-20-43: F.D.A. approved prescription contraceptive drugs and devices.
http://www.rilin.state.ri.us/Statutes/TITLE27/27-20/27-20-43.HTM

FDA Office of Women's Health, Birth Control Guide
http://www.fda.gov/downloads/ForConsumers/ByAudience/ForWomen/FreePublications/UCM282014.pdf
This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member’s subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice. Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.