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

PRIOR AUTHORIZATION
Prior authorization review is not required.

POLICY STATEMENT
BlueCHiP for Medicare and Commercial
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 (EC), also known as backup 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.

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.

MEDICAL CRITERIA
Not applicable.

BACKGROUND
This policy describes Rhode Island General Law 27-20-43 that requires 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.

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 will be 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 are 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.

**COVERAGE**

Benefits may vary between groups/contracts. Please refer to the appropriate 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.

**CODING**

The following codes are covered for BlueCHiP for Medicare and Commercial:

11976, 11981, 57170, 58300, 58301, A4261, A4266, J1050, J7300, J7301, J7302, J7306, J7307

Instead of 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
The following codes are covered under the Pharmacy Benefit for BlueCHiP for Medicare and Commercial:

S4993, J7303, J7304

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

PUBLISHED

Provider Update  Jun 2014
Provider Update  May 2013
Provider Update  Apr 2012
Provider Update  Mar 2011
Provider Update  Mar 2010
Provider Update  Apr 2009
Provider Update  Mar 2008

REFERENCES


2. 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.