
Professional Services Program

17 Alpha-Hydroxyprogesterone Caproate (17P) Guidelines

Effective with date of service September 1, 2010, the Louisiana Medicaid Professional Services program covers the weekly intramuscular injections of 17 Alpha-Hydroxyprogesterone Caproate (17P) for use in pregnant women with a history of pre-term delivery before 37 weeks gestation, and no symptoms of pre-term labor in the current pregnancy. The treatment protocol recommended are weekly injections of 250mg of 17P starting between 16 weeks 0 days and 21weeks 6 days of gestation. Treatment is continued until 36 weeks 6 days gestation. If a woman enters prenatal care late, 17P may be started up until 24 weeks gestation. Women are encouraged to receive all weekly injections for optimal benefit but missed doses and partial therapy still outweighs the risk of no therapy. Although 17P is not currently commercially available, physicians may obtain 17P from an appropriately licensed state pharmacy that offers sterile compounded prescriptions.

Patient Criteria for Louisiana Medicaid coverage:

- History of previous singleton spontaneous pre-term birth before 37 weeks gestation.
- Current singleton pregnancy.
- Initiate treatment between 16⁰ and 23⁶ weeks gestation.
- 17P is not payable for other risk factors for pre-term delivery, including but not limited to multiple gestations, short cervical length, or positive tests for cervicovaginal fetal fibronectin.

Billing Information

- The ICD-9 diagnosis code to be used is currently **V23.41** (Pregnancy with history of pre-term labor). Providers must verify and document that the recipient's history includes a previous spontaneous singleton pre-term delivery that occurred before 37 weeks.
- The recommended dose of 17P is a 250mg weekly intramuscular injection administered from gestational weeks 16 through 36.
- HCPCS code **J3490-TH** is to be used to submit claims* for the medication and will be defined as (17P, 250mg IM). **The 'TH' modifier must be used** to receive proper reimbursement specific to this medication. The Professional Services fee schedule will reflect the reimbursement for the medication using this code and modifier combination. Providers should bill their usual and customary charges.
- A low level 'office visit' (99211-TH) could be billed for the administration of the injection if no higher level evaluation and management service has been billed on that date.
- It is expected that providers will make efforts to minimize the number of additional visits the patient must make to the office and coordinate the injections with the patient's regular prenatal visit/encounter schedule whenever possible.
- ***RHC/FQHCs must list the procedure code for 17P (J3490-TH) as one of the detail lines** when billing for an encounter (T1015-TH) for prenatal services on the same date of service as the administration of this medication. Reimbursement for the medication and its administration is included in the encounter rate.