



Billing Instructions for Inpatient LARCs

Effective June 20, 2014, hospitals will receive an additional payment for the insertion of long-acting reversible contraceptives (LARCs) for women newly post-partum prior to discharge. The payment for the LARC will be equal to the fee on the DME fee schedule and will be in addition to the hospital's per diem payment. Providers may consult the DME fee schedule to see which LARCs are covered and their reimbursement.

The hospital will bill their LARC claim using the appropriate J code to the FI on a CMS 1500 claim form. If the hospitals bills electronically, they will use the 837P with the DME file extension. If the hospital bills a paper claim, they must submit the paper claims with the word DME written in bold, black print on the top of the form.