

Louisiana Medicaid
Office of Public Health - Family Planning Clinic Fee Schedule
Effective for dates of service on and after January 1, 2025

Family Planning Clinic beneficiary criteria:

- Female;
- Age 10 through 59 years;
- Desire services to prevent or to otherwise control family size; and
- Services must be medically necessary.

Column:

1	2	3	4
TOS	Code	Description	Fee
10	11976	Removal, implantable contraceptive capsules	\$92.48
10	11981	Insertion, non-biodegradable drug delivery implant	\$83.08
10	11983	Removal with reinsertion, non-biodegradable drug delivery implant	\$149.96
10	36415	Collection of venous blood by Venipuncture	\$2.15
10	57170	Diaphragm or cervical cap fitting with instructions	\$44.93
10	58300	Insertion of intrauterine device (IUD)	\$50.77
10	58301	Removal of intrauterine device (IUD)	\$62.38
10	81002	Urinalysis, non-automated, without microscopy (use for a routine urinalysis)	\$2.54
10	81025	Urine pregnancy test, by visual color comparison methods	\$6.31
10	85013	Blood count; spun microhematocrit	\$2.36
10	85018	Blood count; hemoglobin (Hgb)	\$2.36
10	87070	Culture, bacterial; any other source except urine, blood or stool, aerobic, with isolation and presumptive identification of isolates (OPH use: only for billing of a Gonorrhea culture)	\$8.57
10	87110	Culture, chlamydia, any source	\$19.49
10	99202	Office visit, New Patient, Expanded – Straightforward (OPH use: for the Initial Family Planning Clinic Visit for a new patient)	\$42.77
10	99211-AJ	Office visit, Established Patient, Minimal Problems (OPH use: for Social Services Counseling provided by a Social Worker)	\$12.36
10	99211	Office visit, Established Patient, Minimal Problems (OPH use: for Sterilization-Physician Counseling).	\$12.36
10	99212	Office visit, Established Patient, Problem – Straightforward (OPH use: for Intermediate Physician Visit for an established patient)	\$24.83
10	99213	Office visit, Established Patient, Expanded – Low Complexity (use for Annual Family Planning Clinic Visit for an established patient)	\$41.53

Column:

1	2	3	4
TOS	Code	Description	Fee
10	A4267	Contraceptive supply, condom, male, each	\$0.06
10	A4268	Contraceptive supply, condom, female, each	\$0.06
10	A4269	Contraceptive supply, spermicide (e.g., foam, gel), each	\$2.42
10	S4993	Contraceptive Pills for Birth Control (One Month Supply)	\$12.69
10	S9470	Nutritional Counseling (OPH use: to report counseling by a licensed dietician/nutritionist)	\$15.18
10	T1001	Nursing Assessment, Evaluation (OPH use: for the nursing assessment/evaluation when the physician is unable to be present for the scheduled Initial/Reopen/Annual Visit and the patient is rescheduled to return for the physician services)	\$15.18
10	T1002	RN Services (OPH use: for the Routine Return Visit to the clinic requiring non-physician services)	\$7.62
10	Q0091	Screening Papanicolaou (Pap) Smear	\$7.63

Column:

1	2	3	4
TOS	Code	Description	Fee
10	J1050	Injection, medroxyprogesterone acetate, 1 mg	\$0.26
10	J7294	Segesterone acetate and ethinyl estradiol 0.15mg, 0.013mg per 24 hours; yearly vaginal system, each	\$2,420.54
10	J7295	Ethinyl estradiol and etonogestrel 0.015mg, 0.12mg per 24 hours; monthly vaginal ring, each	\$162.63
10	J7296	Levonorgestrel-releasing intrauterine contraceptive system (Kyleena), 19.5 mg	\$1,214.63
10	J7297	Levonorgestrel-releasing intrauterine contraceptive system (Liletta), 52 mg	\$931.73
10	J7298	Levonorgestrel-releasing Intrauterine contraceptive system (Mirena), 52 mg	\$1,214.63
10	J7301	Levonorgestrel-releasing Intrauterine contraceptive system (Skyla), 13.5 mg	\$1,011.38
10	J7307	Etonogestrel (contraceptive) implant system, including implant and supplies	\$1,214.63

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If further clarificaiton is needed please contact Gainwell Technologies Provider Relations at 1-800-473-2783.

Column 1: TOS (Type of Service) Definition: Files on which codes are loaded and from which claims are paid. The file to which a claim goes for pricing is determined by, among other things, the type of provider who is billing.

TOS 10: Family Planning Clinic claims are priced off this file.

Column 2: Procedure code

Column 3: Procedure code description

Column 4: Reimbursement rate on file