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COVERED SERVICES

The primary goal of family planning services is to increase access to services which will allow improved reproductive and physical health, improve perinatal outcomes, and reduce the number of unintended pregnancies. Services available to individuals under this program include family planning and family planning-related services.

Family Planning Services

Medicaid covered family planning services include the following:

- Evaluation and management services (office visits) for medically necessary physical examinations or re-visits as it relates to family planning or family planning-related services for both males and females of childbearing age;
- A comprehensive patient history;
- Physical examination;
- Laboratory tests; and
- Contraceptive counseling.
- Contraceptive counseling (including natural family planning), education, followups, and referrals;
- Laboratory examinations and tests for the purposes of family planning and management of sexual health;
- Pharmaceutical supplies and devices to prevent conception, including all methods of contraception approved by the Federal Food and Drug Administration (FDA); and
- Male and female sterilization procedures and follow-up tests provided in accordance with 42 CFR 441, Subpart F.

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Family Planning-Related Services Provided Under State Eligibility Option

Family planning-related services include the diagnosis and treatment of sexually transmitted diseases or infections, regardless of the purpose of the visit at which the disease or infection was discovered.

Medicaid covered family planning-related services include the following:

• Diagnostic procedures to identify and diagnose a sexually transmitted disease (STD) infection (STI), or disorder identified or diagnosed at a family planning visit (other than HIV/AIDS or hepatitis);

NOTE: Treatment for HIV/AIDS or hepatitis are not covered.

- Vaccine to prevent cervical cancer/human papillomavirus (HPV);
- Treatment of major complications from certain family planning procedures, which may result in inpatient services, such as, but not limited to:
 - Treatment of a perforated uterus due to an intrauterine device (IUD) insertion;
 - Treatment of severe menstrual bleeding caused by a Depo-Provera injection requiring a dilation and curettage; or
 - Treatment of surgical or anesthesia-related complications during a sterilization procedure.
- Non-emergency transportation to Medicaid covered family planning and family planning-related appointments.

Return Visits

Return visits (excluding routine supply visits) include an assessment of the beneficiary's health status, current complaints, and an evaluation of birth control method and an opportunity to change these methods.

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Pharmaceuticals and Supplies

The pharmaceuticals (drugs, supplies, and devices) covered in the outpatient pharmacy program for the family planning program includes all FDA approved contraceptives such as:

- Birth control pills and condoms;
- IUDs;
- Implants and patches; and
- Diaphragms and spermicides.

There are select medications which are covered by Take Charge Plus for the treatment of STDs and STIs.

Primary Care Services (Non-Covered)

Primary care services **are not covered** by Take Charge Plus. However, if a need for primary care services is identified during a family planning or family planning-related visit, the health care provider is responsible for informing the beneficiary that these services are not covered.

Examples of non-covered services include but are not limited to:

- Mammograms;
- Hysterectomy; and
- Emergency room visits.

Sterilization

Sterilizations must comply with Medicaid program requirements. Please refer to Section 5.1 of the Professional Services provider manual for the entire sterilization policy.

Beneficiaries who have received sterilization services under Take Charge Plus will only receive family planning-related services in connection with, or as a result of, the sterilization visit.