



Nevada Department of Health and Human Services

Long Acting Reversible Contraceptives (LARCs):

Nevada Medicaid Current Procedural Terminology (CPT) code 58300

Insertion of Long Acting Reversible Contraceptives (LARC) immediately following delivery is a covered Nevada Medicaid benefit.

Division of Health Care Financing and Policy (DHCFP) provided Physician, Special Clinic, Advanced Practice Registered Nurse (APRN), Indian Health Service Outpatient (Tribal and Non-Tribal), pharmacy, Certified Nurse Midwives (CNM), and Physician's Assistant (PA) codes for LARC reimbursement for family planning service for women of childbearing age.

CPT billing codes for medical provider types 12, 17, 20, 24, 47, 52, 77 and 79 are **58300 or 58300-51**.

58300 Insert Intrauterine Device

58300-51 If provided immediately postpartum, modifier 51 is needed.

Note: When a women has an implanted device inserted, she may no longer be eligible for Medicaid when it is time to remove the implant. There is no process for Medicaid reimbursement when the recipient is not Medicaid eligible.

Hospital, Outpatient (12), Special Clinics (17), Physician, M.D. and Osteopath, D.O. (20), Advanced Practice Registered Nurses (APRN) (24), Indian Health Service Hospital, Outpatient (Tribal) (52), Physician's Assistant (PA) (77) and Indian Health Service Hospital, Outpatient (Non-Tribal) (79)

Adapted from the Medicaid Service Manual Chapter 600 and Hewlett Packard Enterprise Billing Guidelines. Refer to Announcement 1200: 08/09/2016 Medicaid Service Manual Chapter 600 online at <http://dhcfp.nv.gov> for additional family planning information and the most recent guidance on billing information.

For informational purposes only and not a substitute for contacting DHCFP for explanation of covered services or code verification for payment. Project supported by the Health Resources and Services Administration (HRSA) and the U.S. Department of Health and Human Services (HHS) under Grant No. B04MC29352, Title V Maternal Child Health Program. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.