

Family Planning Workshop



Overview

To provide an overview of the New Mexico Medicaid Family Planning Category of Eligibility (COE 029). The training will familiarize providers with the definition of this category of eligibility, how to identify clients eligibility on the web portal, scope of coverage for Fee For Service (FFS) eligible clients and overview of claims submission and processing

Objectives

We will review the following:

- Family Planning Definition
- Family Planning Qualifications
- Covered Services
 - Non-Covered Services
 - Family Planning Scenarios
 - NM Medicaid Resources

Family Planning Eligibility – COE 029

029 - Family Planning Medicaid

What is Category of Eligibility (COE) 029?

- Medical Assistance, Medicaid, limited to **Family Planning related services, including Sexually Transmitted Disease (STD) screening and treatment.**
- Submit claims for FFS clients with COE 029 to Conduent State Healthcare.
- Family Planning (COE 029) clients are never enrolled in Managed Care.

029 - Family Planning Medicaid

What populations qualify for these services?

- Women transitioning from “Pregnancy Related Services Only” (COE 035) to FP (COE 029) are eligible for 2 months.
- Men and women who are at or below the 185% poverty level as determined by the Income Support Division (ISD).
- A young adult or senior could qualify for Family Planning services only, which is determined by ISD.

Family Planning Covered Services

029 - Family Planning Medicaid

Which services are covered?

Medical Claims and Institutional Claims:

Under COE 029 an eligible recipient (male or female) is covered for services, consultations and supplies related to birth control, pregnancy prevention and family planning related services which are prescribed and furnished by physicians, hospitals, clinics, pharmacies, and other Medicaid providers. Pap Smears are not covered for women under 21 unless prior history or risk factors make the test **medically warranted**.

The system edits the claim for acceptable revenue code or procedure code, and/or family planning related diagnosis codes. The service is covered if a combination of the following code sets are used to support coverage of the family planning service:

Procedure codes and the diagnosis codes are on the following code lists.

Approved Family Planning Procedures

Requires related family planning diagnosis:

11981	57454	74010	81000	82670	85004	86403	86762	87206	87490	87537	88108	88175	93005	99223	A4931	Q0111
11982	57455	76376	81001	82671	85007	86592	86780	87207	87491	87538	88141	88300	96372	99224	G0145	Q0112
11983	57460	76830	81002	82672	85008	86593	86803	87210	87492	87539	88142	88302	96374	99225	G0202	Q3014
17110	57461	76831	81003	82679	85009	86628	87015	87220	87495	87590	88143	88304	96375	99226	J0456	S0191
17111	57522	76856	81005	82947	85013	86631	87040	87252	87496	87591	88147	88305	96376	99231	J0558	T2001
36415	57800	76857	82040	82948	85014	86632	87070	87270	87497	87592	88148	88307	99070	99232	J0561	
46900	58100	76881	82042	82950	85018	86687	87071	87273	87510	87620	88150	88309	99201	99233	J0690	
46910	58120	76882	82043	82962	85025	86688	87073	87274	87511	87621	88152	88375	99202	99234	J0694	
46916	58340	76977	82105	83001	85027	86689	87075	87320	87512	87622	88153	89310	99203	99235	J0696	
46922	58345	76998	82120	83002	85032	86692	87076	87340	87515	87623	88154	89321	99204	99236	J0697	
46924	58555	77051	82150	83020	85045	86694	87077	87350	87516	87624	88155	90471	99205	99238	J0698	
49320	58558	77052	82247	83021	85300	86695	87081	87389	87517	87625	88160	90472	99211	99239	J0710	
49321	58562	77055	82306	83026	85378	86696	87086	87390	87528	87660	88161	90632	99212	99241	J1885	
49322	58661	77056	82310	83036	85576	86701	87088	87391	87529	87661	88162	90633	99213	99242	J1890	
56405	58662	77057	82330	83690	85597	86702	87102	87470	87530	87800	88164	90634	99214	99243	J2460	
56420	58671	77078	82550	83986	85610	86703	87110	87480	87531	87801	88165	90636	99215	99244	J2510	
56501	58925	77080	82553	84075	85652	86704	87147	87481	87532	87806	88166	90649	99218	99245	J2540	
57061	64435	77081	82565	84144	85730	86706	87164	87482	87533	87808	88167	90650	99219	A0100	J3320	
57420	72170	77082	82570	84146	86317	86707	87184	87485	87534	87810	88172	90739	99220	A0130	J3490	
57421	72190	80074	82575	84702	86318	86708	87186	87486	87535	87850	88173	90743	99221	A0180	P3000	
57452	74000	80076	85607	84703	86382	86709	87205	87487	87536	87912	88174	90746	99222	A0200	P3001	

Approved Family Planning Procedures *Continued*

Procedures are always Family Planning:

11976	G0123
55250	G0141
57170	G9806
58300	J1050
58565	J7296
58600	J7297
58615	J7298
58670	J7300
74740	J7301
74742	J7303
81025	J7304
82677	J7306
88302	J7307
A4261	J8499
A4264	Q9984
A4266	S4989
	S4993

Family Planning ICD-10 Diagnosis Codes

The following diagnosis codes are approved for Family Planning :

N83.0	Z30.45	A54.24	A54.9	A60.01	B00.53	B02.9	B18.8	B97.7
N83.00	Z30.46	A54.29	A55	A60.02	B00.59	B07.8	B18.9	E28.310
N83.01	Z11.4	A54.30	A56.00	A60.03	B00.7	B07.9	B19.10	E28.319
N83.02	A51.0	A54.31	A56.01	A60.04	B00.81	B08.1	B19.20	G43.821
N83.1	A51.1	A54.32	A56.02	A60.09	B00.82	B08.20	B19.9	G43.829
N83.10	A51.2	A54.33	A56.09	A60.1	B00.89	B08.21	B27.00	G43.831
N83.11	A51.3	A54.39	A56.11	A60.9	B00.9	B08.22	B27.01	G43.839
N83.12	A51.31	A54.40	A56.19	A63.0	B02.0	B10.01	B27.02	G43.901
N83.20	A51.32	A54.41	A56.2	A63.8	B02.1	B10.09	B27.09	N34.1
N83.201	A51.39	A54.42	A56.3	A64	B02.21	B10.81	B37.0	N34.2
N83.202	A51.49	A54.43	A56.4	A65	B02.22	B10.82	B37.2	N36.9
N83.209	A51.5	A54.49	A56.8	A74.0	B02.23	B10.89	B37.3	N39.0
N83.29	A51.9	A54.5	A57	A74.81	B02.24	B15.9	B37.41	N70.01
N83.291	A54.00	A54.6	A58	A74.89	B02.29	B16.1	B37.42	N70.02
N83.292	A54.01	A54.81	A59.00	A74.9	B02.30	B16.9	B37.49	N70.03
N83.299	A54.02	A54.82	A59.01	B00.1	B02.31	B17.0	B37.83	N70.11
T83.3	A54.03	A54.83	A59.02	B00.2	B02.32	B17.10	B85.0	N70.12
T83.31	A54.09	A54.84	A59.03	B00.3	B02.33	B17.8	B85.1	N70.13
Z30.015	A54.1	A54.85	A59.09	B00.4	B02.34	B17.9	B85.2	N70.91
Z30.016	A54.21	A54.86	A59.8	B00.50	B02.39	B18.0	B85.3	N70.92
Z30.017	A54.22	A54.89	A59.9	B00.51	B02.7	B18.1	B85.4	N70.93
Z30.44	A54.23	A54.9	A60.00	B00.52	B02.8	B18.2	B86	N71.0

Family Planning ICD-10 Diagnosis Codes *Continued*

The following diagnosis codes are approved for Family Planning :

N71.1	N83.6	N91.1	R85.613	R87.625	Z00.8	Z30.013	Z98.51
N71.9	N83.8	N91.2	R85.614	R87.628	Z01.411	Z30.014	Z98.52
N72	N83.9	N91.3	R85.615	R87.629	Z01.419	Z30.018	
N73.0	N84.0	N91.4	R85.616	R87.69	Z01.42	Z30.019	
N73.1	N84.1	N91.5	R85.618	R87.7	Z01.89	Z30.02	
N73.2	N84.2	N92.0	R85.619	R87.810	Z11.3	Z30.09	
N73.3	N84.3	N92.1	R85.81	R87.811	Z11.51	Z30.2	
N73.4	N84.8	N92.2	R85.82	R87.820	Z11.59	Z30.40	
N73.5	N84.9	N92.3	R87.610	R87.821	Z11.6	Z30.41	
N73.6	N87.0	N92.4	R87.611	R87.89	Z11.8	Z30.42	
N73.8	N87.1	N92.5	R87.612	R87.9	Z12.31	Z30.430	
N73.9	N87.9	N92.6	R87.613	T83.31XA	Z12.4	Z30.431	
N74	N88.8	N93.0	R87.614	T83.31XD	Z13.89	Z30.432	
N75.0	N89.0	N93.8	R87.615	T83.31XS	Z20.2	Z30.433	
N75.1	N89.1	N93.9	R87.616	T83.32XA	Z22.4	Z30.49	
N75.8	N89.3	N94.4	R87.618	T83.32XD	Z22.50	Z30.8	
N75.9	N89.8	N94.5	R87.619	T83.32XS	Z22.51	Z30.9	
N76.0	N90.3	N94.6	R87.620	T83.39XA	Z22.52	Z31.82	
N76.1	N90.7	O72.2	R87.621	T83.39XD	Z22.59	Z32.00	
N76.2	N90.89	R85.610	R87.622	T83.39XS	Z23	Z32.01	
N76.3	N90.9	R85.611	R87.623	Z00.00	Z30.011	Z32.02	
N76.4	N91.0	R85.612	R87.624	Z00.01	Z30.012	Z97.5	

Approved Family Planning Revenue Code List

REVENUE CODE DESCRIPTION	REVENUE CODE
PHARMACY - GENERAL CLASSIFICATION	250
PHARMACY - IV SOLUTIONS	258
IV THERAPY - GENERAL CLASSIFICATION	260
MEDICAL/SURGICAL SUPPLIES AND DEVICES	270
MEDICAL/SURGICAL SUPPLIES & DEVICES – NO	271
MEDICAL/SURGICAL SUPPLIES AND DEVICES	272
ANESTHESIA - GENERAL CLASSIFICATION	370
CLINIC - GENERAL CLASSIFICATION	510
CLINIC - PSYCHIATRIC	513
CLINIC - OB-GYN CLINIC	514
CLINIC - PEDIATRIC CLINIC	515
CLINIC - URGENT CARE CLINIC	516
CLINIC - OTHER CLINIC	519
FREE STANDING CLINIC - GENERAL CLASSIFIC	520
FREE STANDING CLINIC - RURAL HEALTH (CLI	521
FREE STANDING CLINIC - OTHER FREE-STANDI	529
DRUGS REQ SPECIFIC IDENT-DRUGS REQ DETAI	636
RECOVERY ROOM - GENERAL CLASSIFICATION	710
OBSERVATION ROOM	762
OTHER DIAGNOSTIC SERVICES - PREGNANCY TEST	925

Family Planning Non-Covered Services

029 – Service not Family Planning Related

Why does this denial occur when the service was actually for Family Planning?

Procedure code, diagnosis code, or revenue code not recognized as family planning related will result in a denial of a claim line or the entire claim. If the provider feels that the denial is not justified, confirm the claim was submitted accurately. Review for accuracy of coding, both procedure, diagnosis and revenue codes. If errors are found, correct the claim and resubmit using a reconsideration form with a clear explanation of why the claim is being resubmitted. Also, include the transaction control number (TCN) related to the denied claim to avoid a denial for not meeting the filing limit. Do not bill the client for services that are denied due to administrative error.

Family Planning Scenarios

029 - Family Planning Medicaid

Scenario 1:

What if my patient develops a condition that needs treatment that is directly related to a family planning procedure, such as a post-operative infection after sterilization, or an abnormal pap; is that covered?

029 - Family Planning Medicaid

Response:

In these cases, submit the claim to Conduent and if denied, a letter of appeal must be sent to the Medical Assistance Division (MAD). Attach the medical records, doctors' notes, and other medical documentation required to support coverage of the medical service. The Medical Assistance Division evaluates these claims on a case-by-case basis.

The letter and required documents must be sent to the following address:

MAD

Attn: Physical Health Unit Manager

PO Box 2348

Santa Fe, NM 87504-2348

029 - Family Planning Medicaid

Response *Continued*:

If your client receives an abnormal pap smear:

- The pap reveals an STD, STD treatments are covered under COE 029 when billed using the related screening procedure code and diagnosis code. Refer to the list of approved codes.
- The pap smear indicates cervical cancer, she may also be eligible for the Breast or Cervical Cancer Program (COE 052). **Refer the patient to Department of Health Breast and Cervical Cancer Program at 1 (877) 852-2585.**

029 - Family Planning Medicaid

Scenario 2:

My client has the Family Planning COE (029) and desires a treatment that is covered by this COE. However, my facility doesn't offer the necessary service. What should I tell the client?

Response:

- As a provider it is important to be aware of all the services that are offered under this COE, even those you don't offer yourself.
- Refer the patient to a Medicaid Provider that can provide the necessary Family Planning covered service.

029 - Family Planning Medicaid

Scenario 3:

My client has the Family Planning COE (029) and desires a treatment that is **not** covered by this COE. What should I tell the client?

Response:

- If the client's financial situation has changed since last application, advise her to see her ISD caseworker. She may now qualify for Medicaid under a different COE that will cover the medical service.
- If the patient only qualifies for COE 029 – Family Planning, the client may choose to financially cover the service/procedure or can be referred to an FQHC (Federally Qualified Health Center) facility or other medical providers in the community.

029 - Family Planning Medicaid

Response Continued:

If the patient prefers to utilize your facility to obtain these non-covered services advise the patient she will be financially responsible for the services.

Have patient sign in writing indicating that she will be financially responsible for the specific non-Family Planning service that will be performed for your records.

029 - Family Planning Medicaid

Always remember to:

- Check eligibility prior to performing services.
- Ensure all services are covered under this COE using the current approved code lists prior to performing services.
- Be aware of alternatives to offer to patients on the COE 029 – Family Planning such as FQHC facilities to establish an ongoing medical home for routine medical, dental, vision, behavioral, hearing, and all other non-family planning services.
- Pregnant women will be automatically enrolled under COE 029 - Family Planning services 2 months post delivery.

NM Medicaid Resources

New Mexico Medicaid Resources

- New Mexico Medicaid Online
 - Provider Information
 - Provider Login Screen Notices
 - Provider E-News Newsletters
- Medicaid Provider Relations Call Center
- Provider Communication Updates
- Provider Field Representative
- Provider Webinars
- Open Forums and Live Training Sessions

New Mexico Medicaid Resources *Continued*

New Mexico Medicaid Portal – <https://nmmedicaid.portal.conduent.com/static/index.htm>

Claim Inquiries, Eligibility Verification, Electronic Claim Submission, Provider Manuals, E-News

NM Human Services Department – <http://www.hsd.state.nm.us/mad/>

Supplements, Memos, Provider Billing Packets and Policy

Medical Assistance Division – PE Program Staff – HSD.PEDeterminers@state.nm.us

Assistance with PE Applications, PE Determinations, MAD 070, PE Training, PE Certification

Consolidated Customer Service Center (CCSC) Helpdesk– (800) 299 - 7304.

Claim Status, Eligibility, Prior Authorization, Medicaid Updates

Consolidated Customer Service Center (CCSC) Helpdesk – NM.Providers@state.nm.us

Claim research assistance, general Medicaid inquiries, Provider Enrollment Applications, Forms & Instructions

HIPAA Helpdesk – HIPAA.desknm@state.nm.us

Assistance on NM Web Portal, EDI inquiries, and Online Claim Submission with DDE (Direct Data Entry)

Consolidated Customer Service Center (CCSC) Helpdesk – (800) 283-4465

Eligibility inquiries, Fee-for-Service Replacement Medicaid Identification Card, Enroll or change a Managed Care Organization and Eligibility application status

Medical Assistance Division, Program Rules – <http://www.hsd.state.nm.us/providers/rules-nm-administrative-code-.aspx>

NMAC for Programs administered by the Medical Assistance Division

Yes New Mexico - <https://www.yes.state.nm.us/yesnm/home/index>

Apply, check, update, or renew Medical Assistance (Medicaid) benefits

CONDUENT

