

South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
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www.scdhhs.gov

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MEDICAID BULLETIN

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TO: Providers Indicated

SUBJECT: Family Planning Waiver Renewal

The South Carolina Department of Health and Human Services (SCDHHS) received approval from the Centers for Medicare & Medicaid Services (CMS) to continue the Family Planning Waiver (FPW) Expansion of Medicaid Benefits for an additional three years (January 1, 2008 through December 31, 2010). The FPW is a statewide program whose primary objective is to ensure that all eligible women have access to publicly supported outpatient family planning services. Additionally, one course of treatment for some sexually transmitted infections (STIs) found during the family planning visit will be covered.

Potential beneficiaries are women between the ages of 10 and 55 who: 1) are at or below 185% of the Federal Poverty Level, 2) have no health insurance, 3) are legal residents of South Carolina, and 4) have not had a sterilization procedure. Providers are reminded that Medicaid beneficiaries must present a prescription for any pharmaceuticals or devices dispensed to them, including over-the-counter (OTC) items.

Covered Services

Family planning services prevent or delay unwanted or unintended pregnancies. These include the following:

- family planning office or clinic examinations,
- counseling services related to family planning and birth control methods,
- contraceptives (OTC [condoms and foam] and prescriptions),
- related laboratory services,
- testing for STIs when performed during the initial or annual physical exam, and
- treatment for some STIs diagnosed during the initial or annual family planning office or clinic visit.

Family planning services may be rendered by physicians, clinics, pharmacies, or other Medicaid providers. All family planning services billed using the CMS-1500 claim form **must** use a family planning modifier (FP) and diagnosis code.

For a listing of procedure and diagnosis codes that are currently approved for use under the FPW, see Section 4 of the Medicaid Enhanced Services manual on our website at www.scdhhs.gov. **Any codes not listed are not covered for this eligibility group of women.** This list will be updated periodically in Medicaid provider manual, Section 4, as codes are approved or deleted.

Women can receive initial antibiotic treatment for the following STIs: syphilis, chlamydia, gonorrhea, herpes, candidiasis, and trichomoniasis but will only be allowed to receive one course of treatment per year under the waiver. **The physician must write the ICD-9 diagnosis code on the prescription for the STI treatment to be reimbursed by Medicaid.** Applicable co-pays for STI medications will be the responsibility of the beneficiary.

When using First Health's point-of-sale system, pharmacists submitting claims for antibiotics for FPW beneficiaries must enter the value "1" in the Diagnosis Qualifier field (field #492-WE) and the actual ICD-9 code as indicated on the prescription in the Diagnosis Code field (Field #424-DO). In addition, the Diagnosis Code Count field (field #491-VE) should also be populated with the number of ICD-9 values that are being submitted on the claim (for example, this value will be "1" if one ICD-9 is submitted).

Questions regarding this Medicaid Bulletin may be directed to your program representative.

/s/

Emma Forkner
Director

EF/mhp

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