# Medicaid Family Planning Waiver Services
## CPT Codes and ICD-10 Diagnosis Codes

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Description of Covered Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>99384FP</td>
<td>Evaluation and Management</td>
</tr>
<tr>
<td>99385FP</td>
<td>Family planning new visit</td>
</tr>
<tr>
<td>99386FP</td>
<td></td>
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<tr>
<td>99394FP</td>
<td></td>
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<tr>
<td>99395FP</td>
<td></td>
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<tr>
<td>99396FP</td>
<td></td>
</tr>
<tr>
<td>99401FP</td>
<td>HIV counseling (pre-test) 15 min</td>
</tr>
<tr>
<td>99402FP</td>
<td>HIV counseling (post-test) 30 min</td>
</tr>
<tr>
<td>99403FP</td>
<td>Family planning counseling visit</td>
</tr>
<tr>
<td>99211FP</td>
<td>Family planning supply visit</td>
</tr>
<tr>
<td>99201</td>
<td>Extended family planning services-new patient (treatment of STI)</td>
</tr>
<tr>
<td>99211</td>
<td>Extended family planning services-established patient (treatment of STI)</td>
</tr>
</tbody>
</table>

### Medication/Device

- **J1050**: Injection medroxyprogesterone acetate (Depo-Provera)
- **J7300**: Intrauterine copper device (Paraguard)
- **J7301**: Levonorgestrel-releasing intrauterine contraceptive system (Skyla), 13.5 mg
- **J7297**: Levonorgestrel-releasing intrauterine contraceptive system (Liletta), 52 mg
- **J7298**: Levonorgestrel-releasing intrauterine contraceptive system (Mirena), 52 mg
- **J7307**: Etonogestrel implant system, including implant and supplies (Nexplanon)
- **J7296**: Levonorgestrel-releasing intrauterine contraceptive (Kylenna), 19.5 mg

### Anesthesia, Surgical and Radiology

- **00840**: Anesthesia for Intraperitoneal procedures in lower abdomen including laparoscopy
- **00851**: Anesthesia for tubal ligation/transection
- **11976**: Removal of implantable contraceptive capsules
- **11981**: Insertion, non-biodegradable drug delivery implant
- **11982**: Removal, non-biodegradable drug delivery implant
- **11983**: Removal with reininsertion, non-biodegradable drug delivery implant
- **57170**: Diaphragm or cervical cap fitting with instructions
- **57410**: Pelvic examination under anesthesia
- **57452**: Colposcopy of the cervix
- **57454**: Colposcopy with biopsy(s) of the cervix and endocervical curettage
- **57460**: Colposcopy with loop electrode biopsy(s)
- **58300**: Insertion of intrauterine device
- **58301**: Removal of intrauterine device
- **58340**: Catheterization and introduction of saline or contrast material for saline infusion for hysterosalpingography
- **58600**: Ligation or transection of fallopian tube(s)
- **58615**: Occlusion of fallopian tube(s) by device (e.g. band, clip, Falope ring)
- **58670**: Surgical laparoscopy, with fulguration of oviducts (with or without transection)
- **58671**: Surgical laparoscopy, with occlusion of oviducts by device (e.g. band, clip, or Falope ring)
- **74740**: Radiological supervision and interpretation x-ray of uterine tubes and ovaries
- **76856**: Ultrasound of pelvis, non-obstetric (to check placement of intrauterine devices)
### Medicaid Family Planning Waiver Services
#### CPT Codes and ICD-10 Diagnosis Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>76882</td>
<td>Ultrasound of extremity, limited, anatomic specific (to check for implantable contraceptive device)</td>
</tr>
<tr>
<td>81000</td>
<td>Urinalysis, non-automated, with microscopy</td>
</tr>
<tr>
<td>81001</td>
<td>Automated, with microscopy</td>
</tr>
<tr>
<td>81002</td>
<td>Non-automated, without microscopy</td>
</tr>
<tr>
<td>81003</td>
<td>Automated, without microscopy</td>
</tr>
<tr>
<td>81005</td>
<td>Urinalysis; qualitative or semi-qualitative</td>
</tr>
<tr>
<td>81007</td>
<td>Urinalysis; bacteriuria screen, by kit</td>
</tr>
<tr>
<td>81015</td>
<td>Urinalysis; bacteriuria screen, microscopic only</td>
</tr>
<tr>
<td>81025</td>
<td>Urine pregnancy test, by visual color comparison</td>
</tr>
<tr>
<td>82947</td>
<td>Glucose; quantitative, blood</td>
</tr>
<tr>
<td>84702</td>
<td>Gonadotropin, chorionic (hCG); quantitative</td>
</tr>
<tr>
<td>84703</td>
<td>Gonadotropin, chorionic (hCG); qualitative</td>
</tr>
<tr>
<td>85007</td>
<td>Blood count; manual differential WBC count</td>
</tr>
<tr>
<td>85014</td>
<td>Hematocrit</td>
</tr>
<tr>
<td>85018</td>
<td>Hemoglobin</td>
</tr>
<tr>
<td>86255</td>
<td>Fluorescent antibody; screen, each antibody (HIV &amp; herpes)</td>
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<tr>
<td>86382</td>
<td>Neutralization test, viral</td>
</tr>
<tr>
<td>86403</td>
<td>Rubella screen (IgG)</td>
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<tr>
<td>86580</td>
<td>Tuberculosis, intradermal</td>
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<tr>
<td>86592</td>
<td>Syphilis test; qualitative (e.g., VDRL, RPR, ART)</td>
</tr>
<tr>
<td>86593</td>
<td>Syphilis test; quantitative</td>
</tr>
<tr>
<td>86689</td>
<td>HTLV or HIV antibody, confirmatory test (western blot)</td>
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<tr>
<td>86694</td>
<td>Herpes simplex, non-specific type test</td>
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<tr>
<td>86695</td>
<td>Herpes simplex, type 1</td>
</tr>
<tr>
<td>86696</td>
<td>Herpes simplex, type 2</td>
</tr>
<tr>
<td>86701</td>
<td>Antibody; HIV-1</td>
</tr>
<tr>
<td>86702</td>
<td>Antibody; HIV-2</td>
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<tr>
<td>86703</td>
<td>Antibody; HIV-1 and HIV-2, single assay</td>
</tr>
<tr>
<td>86706</td>
<td>Hepatitis B surface antibody (HBsAb)</td>
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<tr>
<td>86707</td>
<td>Hepatitis Be antibody (HBeAb)</td>
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<tr>
<td>86762</td>
<td>Rubella titer</td>
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<tr>
<td>86803</td>
<td>Hepatitis C antibody</td>
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<tr>
<td>87070</td>
<td>Culture, bacterial, definitive; any other source (GC)</td>
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<tr>
<td>87075</td>
<td>Culture, bacterial, any source; anaerobic (isolation)</td>
</tr>
<tr>
<td>87081</td>
<td>Culture, bacterial, screening only (GC)</td>
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<tr>
<td>87086</td>
<td>Culture, bacterial, urine; quantitative, colony count</td>
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<tr>
<td>87088</td>
<td>Culture, bacterial, urine; quantitative colony count, with isolation and presumptive identification of each isolate</td>
</tr>
<tr>
<td>87110</td>
<td>Culture, chlamydia</td>
</tr>
<tr>
<td>87164</td>
<td>Dark field examination, any source, includes specimen collection</td>
</tr>
<tr>
<td>87205</td>
<td>Smear, primary source, with interpretation; Gram or Giemsa stain for bacteria, fungi, or cell types; (gonorrhea)</td>
</tr>
<tr>
<td>87206</td>
<td>Smear, primary source, with interpretation; (chlamydia)</td>
</tr>
<tr>
<td>87210</td>
<td>Smear, primary source, wet mount isolation, with stain</td>
</tr>
<tr>
<td>CPT Code</td>
<td>Description</td>
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<tr>
<td>----------</td>
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</tr>
<tr>
<td>87252</td>
<td>Virus identification; tissue culture inoculation &amp; observation</td>
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<tr>
<td>87270</td>
<td>Infectious agent antigen detection by immunofluorescent technique, chlamydia trachomatis</td>
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<tr>
<td>87273</td>
<td>Infectious agent antigen detection by immunofluorescent technique, herpes simplex virus type 2</td>
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<tr>
<td>87274</td>
<td>Infectious agent antigen detection by immunofluorescent technique, herpes simplex virus type 1</td>
</tr>
<tr>
<td>87340</td>
<td>Hepatitis B surface antigen (HBsAg)</td>
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<tr>
<td>87341</td>
<td>Hepatitis B surface antigen (HBsAg) neutralization</td>
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<tr>
<td>87350</td>
<td>Hepatitis Be antigen (HBeAg)</td>
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<tr>
<td>87390</td>
<td>HIV-1</td>
</tr>
<tr>
<td>87480</td>
<td>Candida species, direct probe technique</td>
</tr>
<tr>
<td>87481</td>
<td>Candida species, amplified probe technique</td>
</tr>
<tr>
<td>87490</td>
<td>Chlamydia trachomatis, direct probe technique</td>
</tr>
<tr>
<td>87491</td>
<td>Chlamydia trachomatis, amplified probe technique</td>
</tr>
<tr>
<td>87510</td>
<td>Gardnerella vaginalis, direct probe technique</td>
</tr>
<tr>
<td>87511</td>
<td>Gardnerella vaginalis, amplified probe technique</td>
</tr>
<tr>
<td>87516</td>
<td>Hepatitis B virus, amplified probe technique</td>
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<tr>
<td>87520</td>
<td>Hepatitis C virus, direct probe technique</td>
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<tr>
<td>87521</td>
<td>Hepatitis C virus, amplified probe technique</td>
</tr>
<tr>
<td>87522</td>
<td>Hepatitis C virus, quantification</td>
</tr>
<tr>
<td>87528</td>
<td>Herpes simplex virus, direct probe technique</td>
</tr>
<tr>
<td>87529</td>
<td>Herpes simplex virus, amplified probe technique</td>
</tr>
<tr>
<td>87530</td>
<td>Herpes simplex, quantification</td>
</tr>
<tr>
<td>87534</td>
<td>HIV-1, direct probe technique</td>
</tr>
<tr>
<td>87535</td>
<td>HIV-1, amplified probe technique</td>
</tr>
<tr>
<td>87590</td>
<td>Neisseria gonorrhoeae, direct probe technique</td>
</tr>
<tr>
<td>87591</td>
<td>Neisseria gonorrhoeae, amplified probe technique</td>
</tr>
<tr>
<td>87592</td>
<td>Neisseria gonorrhoeae, quantification</td>
</tr>
<tr>
<td>87623</td>
<td>HPV low-risk type detection test</td>
</tr>
<tr>
<td>87624</td>
<td>HPV high-risk type detection test</td>
</tr>
<tr>
<td>87660</td>
<td>Trichomonas vaginitis, direct probe technique</td>
</tr>
<tr>
<td>87661</td>
<td>Trichomonas vaginitis, amplified probe technique</td>
</tr>
<tr>
<td>87810</td>
<td>Infectious agent antigen detection by immunoassay with direct optical observation; chlamydia trachomatis</td>
</tr>
<tr>
<td>87850</td>
<td>Infectious agent antigen detection by immunoassay with direct optical observation; Neisseria gonorrhoeae</td>
</tr>
<tr>
<td>88141</td>
<td>Cytopathology, cervical or vaginal (any system) requiring physician interpretation</td>
</tr>
<tr>
<td>88142</td>
<td>Cytopathology, cervical or vaginal (preservative fluid) under physician supervision</td>
</tr>
<tr>
<td>88143</td>
<td>Cytopathology, cervical or vaginal with manual screen &amp; re-screen under physician supervision</td>
</tr>
<tr>
<td>88150</td>
<td>Cytopathology, slides, cervical or vaginal, manual screen under physician supervision</td>
</tr>
<tr>
<td>88152</td>
<td>Cytopathology, slides, cervical or vaginal with manual screening and computer-assisted rescreen under physician supervision</td>
</tr>
<tr>
<td>88153</td>
<td>Cytopathology, slides, with manual screen &amp; re-screen under physician supervision</td>
</tr>
<tr>
<td>88155</td>
<td>Cytopathology, slides, cervical or vaginal, with definitive hormonal evaluation</td>
</tr>
</tbody>
</table>
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<tr>
<th>Code</th>
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<tbody>
<tr>
<td>88164</td>
<td>Cytopathology, slides, cervical or vaginal, (Bethesda System); with manual screening under physician supervision</td>
</tr>
<tr>
<td>88165</td>
<td>Cytopathology, slides, cervical or vaginal (Bethesda System); with manual screen &amp; re-screen under physician supervision</td>
</tr>
<tr>
<td>88166</td>
<td>Cytopathology, slides, cervical or vaginal (Bethesda System), manual screen &amp; computer-assisted re-screen under physician supervision</td>
</tr>
<tr>
<td>88167</td>
<td>Cytopathology, slides, cervical or vaginal, (Bethesda System), using cell selection and review under physician supervision</td>
</tr>
<tr>
<td>88174</td>
<td>Cytopathology, cervical or vaginal, (any reporting system), collected in preservative fluid, automated thin layer preparation, screen by automated system, under physician supervision</td>
</tr>
<tr>
<td>88175</td>
<td>With screen by automated system and manual rescreening or review, under physician supervision</td>
</tr>
<tr>
<td>88302</td>
<td>Level II surgical pathology, gross and microscopic (sterilization)</td>
</tr>
<tr>
<td>88305</td>
<td>Level IV surgical pathology, gross and microscopic (colposcopy)</td>
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</table>

<table>
<thead>
<tr>
<th>ICD-10 Code</th>
<th>Description of Covered Diagnosis Codes</th>
</tr>
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<tbody>
<tr>
<td>A51</td>
<td>Early syphilis (Select appropriate diagnosis code)</td>
</tr>
<tr>
<td>A51.0 – A51.9</td>
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<tr>
<td>A53.9</td>
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<tr>
<td>A60</td>
<td>Anogenital herpesviral(herpes simplex) infections (Select appropriate diagnosis code)</td>
</tr>
<tr>
<td>A60.0 - A60.9</td>
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<tr>
<td>A54</td>
<td>Gonococcal infection (Select appropriate diagnosis code)</td>
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<td>A54.0 – 54.21</td>
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<tr>
<td>A54.24 – A54.29</td>
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<td>A54.5 – A54.6</td>
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<td>A54.9</td>
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<tr>
<td>A55</td>
<td>Chlamydial Infections (Select appropriate diagnosis code)</td>
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<tr>
<td>A56.0 – A56.8</td>
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<tr>
<td>A74.89-A74.9</td>
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<tr>
<td>A57</td>
<td>Chancroid</td>
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<tr>
<td>A58</td>
<td>Granuloma Inguinale</td>
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<tr>
<td>A59</td>
<td>Trichomoniasis (Select appropriate diagnosis code)</td>
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<td>A59.0 – A59.9</td>
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<tr>
<td>A60</td>
<td>Anogenital herpesviral Infections (Select appropriate diagnosis code)</td>
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<td>A60.00</td>
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<tr>
<td>A60.03–A60.9</td>
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<tr>
<td>A63</td>
<td>Other predominantly sexually transmitted diseases, not elsewhere classified (Select appropriate diagnosis code)</td>
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<tr>
<td>Code</td>
<td>Description</td>
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<tr>
<td>A63.0 - A64</td>
<td>Medicaid Family Planning Waiver Services</td>
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<tr>
<td>B37</td>
<td>Candidiasis (Select appropriate diagnosis code)</td>
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<td>B37.3-B37.49</td>
<td>Other viral warts</td>
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<tr>
<td>B07.8-B07.9</td>
<td>Non-specific urethritis</td>
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<td>N34.1</td>
<td>Non-specific urethritis</td>
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<tr>
<td>N86</td>
<td>Erosion and ectropion of cervix uteri</td>
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<tr>
<td>N87.0 - N87.9</td>
<td>Cervical dysplasia</td>
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<tr>
<td>N87.1</td>
<td>Moderate cervical dysplasia</td>
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<tr>
<td>N87.9</td>
<td>Dysplasia of cervix uteri, unspecified (Select appropriate diagnosis code)</td>
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<tr>
<td>N88</td>
<td>Other non-inflammatory disorders of cervix uteri (Select appropriate diagnosis code)</td>
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<tr>
<td>R87.6</td>
<td>Abnormal cytological findings in specimens from female genital organs (Select appropriate diagnosis code)</td>
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<tr>
<td>R87.610 - R87.9</td>
<td>Abnormal cytological findings in specimens from female genital organs (Select appropriate diagnosis code)</td>
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<td>Z01.41</td>
<td>Encounter for gynecological examination (Select appropriate diagnosis code)</td>
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<td>Z01.411 - Z01.42</td>
<td>Encounter for gynecological examination (Select appropriate diagnosis code)</td>
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<td>Z11.5</td>
<td>Encounter for screening for other viral diseases (Select appropriate diagnosis code)</td>
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<td>Z11.51-Z11.9</td>
<td>Encounter for screening for other viral diseases (Select appropriate diagnosis code)</td>
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<td>Z30</td>
<td>Encounter for contraceptive management (Select appropriate diagnosis code)</td>
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<td>Encounter for sterilization</td>
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<tr>
<td>Z32.0</td>
<td>Encounter for pregnancy test (Select appropriate diagnosis code)</td>
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<tr>
<td>Z32.00-Z32.02</td>
<td>Encounter for pregnancy test (Select appropriate diagnosis code)</td>
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