Maryland Medicaid Program
Family Planning Waiver Services

Medicaid Family Planning Waiver Program (FPP)
Maryland Medicaid Family Planning Waiver Program is a limited benefits program for low-income women. Family planning services provide individuals with the information and means to prevent unplanned pregnancy and maintain reproductive health. Benefits are limited to services related to contraceptive management.

- There are no premiums, copays or deductibles
- All FDA-approved contraceptive methods, products and devices, including long acting reversible contraceptives (LARCs) such as IUDs (Intrauterine Devices) are covered. See Factsheet #4, Long-Acting Reversible Contraceptives.
- Permanent sterilizations may be covered. See Factsheet #5, Permanent Sterilization for more details on the requirements for the procedures.

Services Not Covered by the FPP
Women in this limited benefits program do not have coverage for services that are not specifically listed below. Some examples of specifically excluded services are: diagnostic and treatment services for infertility; gynecological treatment or cancer treatment; treatment for HIV-AIDS related conditions; and prenatal care and delivery.

Refer low-income pregnant women to www.marylandhealthconnection.gov or their local health department to apply for full Medicaid benefits.

FPP Waiver Covered Services
The Waiver Program recognizes office visit codes and preventive visit codes as family planning services when billed with a contraceptive management diagnosis code. Use the appropriate E&M code for new and established patients for family planning visits, based on the complexity of services provided during the visit or the appropriate preventive code. The provider must use the appropriate ICD-10 code from the “Z30” (encounter for contraceptive management) series.

The services below are covered when performed as part of a family planning/contraceptive management visit:
- Pelvic Exams
- Screening test, such as pap smears, labs and/or screening for sexually transmitted infections
- Advice about birth control methods
- FDA-approved contraception and contraceptive devices including emergency contraception
- Long Acting Reversible Contraceptives (IUD & contraceptive Implants); see Factsheet #4
- Screening and treatment for vaginitis and UTIs
- Screening for HIV
- Permanent sterilization for women age 21 and older; see Factsheet #5
- Human Papilloma Virus (HPV) vaccine
**HPV Vaccine Codes**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90649-SE</td>
<td>HPV vaccine, quadrivalent, 3 dose schedule administration fee</td>
</tr>
<tr>
<td>90650-SE</td>
<td>HPV vaccine, bivalent, 3 dose schedule administration fee</td>
</tr>
<tr>
<td>90649</td>
<td>HPV vaccine, quadrivalent, 3 dose schedule</td>
</tr>
<tr>
<td>90650</td>
<td>HPV vaccine, bivalent, 3 dose schedule</td>
</tr>
</tbody>
</table>

For individuals under age 19 providers must obtain vaccine through the Vaccines for Children Program. The SE modifier is used for the administration of VFC vaccine. Administration fees will only be paid when administering VFC vaccines. For beneficiaries age 19 and over providers must bill the acquisition cost of the vaccine and the charges for administration are part of the E&M code.

**Oral Contraceptives** - A maximum six-month supply may be dispensed per prescription. Prescribers must complete a (FDA) Med-Watch Form and forward to the Maryland Pharmacy Program for review before the Program will reimburse at the “brand” rate for prescriptions dispensed as “brand medically necessary”. For additional information or to obtain the form, go to: [https://mmcp.dhmh.maryland.gov/Pages/Provider-Information.aspx](https://mmcp.dhmh.maryland.gov/Pages/Provider-Information.aspx)

**Prescriptions** - Maryland law allows pharmacists to accept verbal prescriptions, with the exception of Schedule II controlled substances, from prescribing providers via phone for Medicaid recipients. Providers must use tamper-resistant prescription pads for written prescriptions. See General Provider Transmittal #63 on the Program’s website: [https://mmcp.dhmh.maryland.gov/Pages/Provider-Information.aspx](https://mmcp.dhmh.maryland.gov/Pages/Provider-Information.aspx)

**Emergency Contraception (EC)** is a second chance to help prevent an unplanned pregnancy following unprotected sex, contraceptive failure or sexual assault. EC is available at pharmacies without a prescription regardless of age. Medicaid FFS limits dispensing of EC to 1 pack per 30 days.

**Condoms** – Beneficiaries can obtain 12 latex condoms per dispensing without a prescription.

**Contraceptive products** that are available at the pharmacy with a prescription include diaphragms, cervical cap, contraceptive rings and patches.

**Codes for Contraceptive Products**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>57170</td>
<td>Diaphragm fitting with instructions</td>
</tr>
<tr>
<td>A4266</td>
<td>Diaphragm</td>
</tr>
<tr>
<td>A4261</td>
<td>Cervical Cap</td>
</tr>
<tr>
<td>J7303</td>
<td>Contraceptive vaginal ring</td>
</tr>
<tr>
<td>J7304</td>
<td>Contraceptive hormone patch</td>
</tr>
<tr>
<td>99070</td>
<td>Other contraceptive product not listed</td>
</tr>
</tbody>
</table>

See Factsheet #4 for codes for LARCs

Providers should only use A- and J- codes for contraceptives supplied during an office visit. Report the NDC/quantity when billing drugs, products, and devices identified by A- and J- codes. Providers must bill no more than their acquisition cost. To facilitate claims processing a fee is set for each code. However, if the provider can document that their acquisition cost was greater than the set fee, attach a copy of the invoice to the claim form for verification and the acquisition cost will be paid.
**Lab Tests**
Providers and clinics should only bill, as a part of the office visit, for labs and cytopathology services that are provided in their facility. If lab and/or cytopathology results are performed by an outside lab, the provider or clinic may not bill Medicaid for the test(s); the lab should bill Medicaid directly.

For additional information, go to the **Professional Services Provider Manual and Fee Schedule** on the Program’s website:
https://mmcp.dhmh.maryland.gov/Pages/Provider-Information.aspx

Other drugs covered by the FP Waiver Program include drugs to treat sexually transmitted infections, urinary tract infections and vaginitis in the following drug classes:

- Anti-fungals
- Anti-virals (for HSV)
- Cephalosporins
- Macrolides
- Miscellaneous beta-Lactams
- Penicillins
- Sulfonamides
- Tetracyclines
- Metronidazole
- Other miscellaneous antibiotics, not otherwise noted above

For additional information on Medicaid’s FFS Pharmacy Program, go to:

For Family Planning Waiver Program questions, go to:

For FP Waiver claim inquiries, call Provider Relations at 410-767-5503.

Call the Community Liaison and Care Coordination Division at 410-767-6750 for questions regarding FP Waiver Program services.