

INDIANA HEALTH COVERAGE PROGRAMS

PROVIDER CODE TABLES

# Family Planning Eligibility Program Codes

*Note:* Due to possible changes in Indiana Health Coverage Programs (IHCP) policy or national coding updates, inclusion of a code on the code tables does not necessarily indicate current coverage. See <u>IHCP Bulletins</u> and <u>IHCP Fee Schedules</u> for updates to coding, coverage and benefit information.

For information about using these code tables, see the <u>Family Planning Eligibility Program</u> provider reference module.

Table 1 – ICD-10 Diagnosis Codes for the Family Planning Eligibility Program

Table 2 – Procedure Codes for the Family Planning Eligibility Program

Diagnosis Code	Description
A51.0	Primary genital syphilis
A51.1	Primary anal syphilis
A51.2	Primary syphilis of other sites (includes breast)
A53.9	Syphilis, unspecified
A54.01	Gonococcal cystitis and urethritis, unspecified
A54.03	Gonococcal cervicitis, unspecified
A54.22	Gonococcal prostatitis (acute)
A54.23	Gonococcal infection of other male genital organs
A54.24	Gonococcal female pelvic inflammatory disease
A54.29	Other gonococcal genitourinary infections
A54.6	Gonococcal infection of anus and rectum
A56.00	Chlamydial infection of lower genitourinary tract, unspecified
A56.01	Chlamydial cystitis and urethritis
A56.02	Chlamydial vulvovaginitis
A56.09	Other chlamydial infection of lower genitourinary tract
A56.11	Chlamydial female pelvic inflammatory disease
A56.19	Other chlamydial genitourinary infection
A56.2	Chlamydial infection of genitourinary tract, unspecified
A56.3	Chlamydial infection of anus and rectum
A56.4	Chlamydial infection of the pharynx organs

Diagnosis Code	Description
A56.8	Sexually transmitted chlamydial infection of other sites
A59.00	Urogenital trichomoniasis, unspecified
A59.01	Trichomonal vulvovaginitis
A59.02	Trichomonal prostatitis
A59.03	Trichomonal cystitis and urethritis
A59.09	Other urogenital trichomoniasis
A60.00	Herpesviral infection of urogenital system, unspecified
A60.01	Herpesviral infection of penis
A60.02	Herpesviral infection of other male genital organs
A60.03	Herpesviral cervicitis
A60.04	Herpesviral vulvovaginitis
A60.09	Herpesviral infection of other urogenital tract
A63.0	Anogenital warts
A63.8	Other specified predominantly sexually transmitted diseases
A74.89	Other chlamydial diseases
A74.9	Chlamydial infection, unspecified
B37.31	Acute candidiasis of vulva and vagina
B37.32	Chronic candidiasis of vulva and vagina
B37.41	Candidal cystitis and urethritis
B37.42	Candidal balanitis
B80	Enterobiasis
B97.7	Papillomavirus as the cause of diseases classified elsewhere
N34.1	Nonspecific urethritis
N75.0	Cyst of Bartholin's gland
N76.0	Acute vaginitis
N76.1	Subacute and chronic vaginitis
N76.2	Acute vulvitis
N76.3	Subacute and chronic vulvitis
N76.82	Fournier disease of vagina and vulva
N77.1	Vaginitis, vulvitis and vulvovaginitis in diseases classified elsewhere
R36.9	Urethral discharge, unspecified
T74.51XA	Adult forced sexual exploitation, confirmed, initial encounter
T74.51XD	Adult forced sexual exploitation, confirmed, subsequent encounter
T74.52XA	Child sexual exploitation, confirmed, initial encounter
T74.52XD	Child sexual exploitation, confirmed, subsequent encounter
T76.51XA	Adult forced sexual exploitation, suspected, initial encounter
T76.51XD	Adult forced sexual exploitation, suspected, subsequent encounter
T76.52XA	Child sexual exploitation, suspected, initial encounter

Diagnosis Code	Description
T76.52XD	Child sexual exploitation, suspected, subsequent encounter
Z04.41	Encounter for examination and observation following alleged adult rape
Z04.42	Encounter for examination and observation following alleged child rape
Z04.81	Encounter for examination and observation of victim following forced sexual exploitation
Z11.3	Encounter for screening for infections with a predominantly sexual mode of transmission
Z11.4	Encounter for screening for human immunodeficiency virus (HIV)
Z11.51	Encounter for screening for human papillomavirus (HPV)
Z11.8	Encounter for screening for other infectious and parasitic diseases
Z12.4	Encounter for screening for malignant neoplasm of cervix
Z20.6	Contact with and (suspected) exposure to human immunodeficiency virus [HIV]
Z21	Asymptomatic human immunodeficiency virus [HIV] infection status
Z30.011	Encounter for initial prescription of contraceptive pills
Z30.012	Encounter for prescription of emergency contraception
Z30.013	Encounter for initial prescription of injectable contraceptive
Z30.014	Encounter for initial prescription of intrauterine contraceptive device
Z30.015	Encounter for initial prescription of vaginal ring hormonal contraceptive
Z30.016	Encounter for initial prescription of transdermal patch hormonal contraceptive device
Z30.017	Encounter for initial prescription of implantable subdermal contraceptive
Z30.018	Encounter for initial prescription of other contraceptives
Z30.019	Encounter for initial prescription of contraceptives, unspecified
Z30.02	Counseling and instruction in natural family planning to avoid pregnancy
Z30.09	Encounter for other general counseling and advice on contraception
Z30.2	Encounter for sterilization
Z30.40	Encounter for surveillance of contraceptives, unspecified
Z30.41	Encounter for surveillance of contraceptive pills; refills
Z30.42	Encounter for surveillance of injectable contraceptive
Z30.430	Encounter for insertion of intrauterine contraceptive device
Z30.431	Encounter for routine checking of intrauterine contraceptive device
Z30.432	Encounter for removal of intrauterine contraceptive device
Z30.433	Encounter for removal and reinsertion (replacement) of intrauterine contraceptive device
Z30.44	Encounter for surveillance of vaginal ring hormonal contraceptive device
Z30.45	Encounter for surveillance of transdermal patch hormonal contraceptive device
Z30.46	Encounter for surveillance of implantable subdermal contraceptive
Z30.49	Encounter for surveillance of other contraceptives
Z30.8	Encounter for other contraceptive management
Z30.9	Encounter for contraceptive management, unspecified
Z32.00	Encounter for pregnancy test, result unknown
Z32.01	Encounter for pregnancy test, result positive

Diagnosis Code	Description		
Z32.02	Encounter for pregnancy test, result negative		
Z71.7	Human immunodeficiency virus [HIV] counseling		
Z71.89	Other specified counseling		
	Table 1 Revision History		
May 29, 2025, upd	late:		
	ective October 1, 2024): Z03.818, Z11.52, Z11.59, Z20.822, Z20.828, Z23		
October 1, 2022, u	pdate:		
Added (effecti	ve October 1, 2022): B37.31, B37.32, N76.82		
Removed (effe	ective October 1, 2022): B37.3		
January 1, 2021, i	ıpdate:		
Added tempor	arily (effective January 1, 2021): Z11.52, Z20.822		
December 17, 202			
Added tempor	arily (effective December 11, 2020): Z23		
	April 21, 2020, update:		
Added temporarily (effective April 1, 2020): Z03.818, Z11.59, Z20.828			
November 20, 201			
Added (correction): Z30.2			
October 1, 2018, u			
,	Added (effective October 1, 2018): T74.51XA, T74.51XD, T74.52XA, T74.52XD, T76.51XA, T76.51XD, T76.52XA, T76.52XD, Z04.81		
August 25, 2017, 1	August 25, 2017, update:		
ICD-10 S	Consolidated two tables: ICD-10 Primary Diagnosis Codes for the Family Planning Eligibility Program and ICD-10 Sexually Transmitted Disease (STD) and Sexually Transmitted Infection (STI) Diagnosis Codes for the Family Planning Eligibility Program		
•	Added (effective August 25, 2017): Z04.41, Z04.42, Z30.42		
October 1, 2016, u	pdate:		
Added (effecti	Added (effective October 1, 2016): Z30.015, Z30.016, Z30.017, Z30.44, Z30.45, Z30.46		

<i>Note:</i> For procedure codes that must be billed with the appropriate National Drug Code (NDC), see Procedure Codes That Require NDCs, accessible from the <u>Code Sets</u> page at in.gov/medicaid/providers.	
Procedure Code	Description
00840	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; not otherwise specified
00851	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; tubal ligation/transection
00920	Anesthesia for procedures on male genitalia (including open urethral procedures); not otherwise specified
00921	Anesthesia for procedures on male genitalia (including open urethral procedures); vasectomy, unilateral or bilateral
00940	Anesthesia for vaginal procedures (including biopsy of labia, vagina, cervix or endometrium); not otherwise specified
00950	Anesthesia for vaginal procedures (including biopsy of labia, vagina, cervix or endometrium); culdoscopy
00952	Anesthesia for vaginal procedures (including biopsy of labia, vagina, cervix or endometrium); hysteroscopy and/or hysterosalpingography
11976	Removal, implantable contraceptive capsules
11981	Insertion, non-biodegradable drug delivery implant
11982	Removal, non-biodegradable drug delivery implant
11983	Removal with insertion, non-biodegradable drug delivery implant
36415	Collection of venous blood by venipuncture
36416	Collection of capillary blood specimen (e.g., finger, heel, ear stick)
46900	Destruction of lesion(s), anus (e.g., condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; chemical
46924	Destruction of lesion(s), anus (e.g., condyloma, papilloma, molluscum contagiosum, herpetic vesicle), extensive (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery)
53230	Excision of urethral diverticulum (separate procedure); female
53260	Excision or fulguration; urethral polyp(s), distal urethra
54050	Destruction of lesion(s), penis (e.g., condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; chemical
54056	Destruction of lesion(s), penis (e.g., condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; cryosurgery
54065	Destruction of lesion(s), penis (e.g., condyloma, papilloma, molluscum contagiosum, herpetic vesicle), extensive (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery)
55250	Vasectomy, unilateral or bilateral (separate procedure), including postoperative semen examination(s)
56405	Incision and drainage of vulva or perineal abscess
56420	Incision and drainage of female genital gland abscess
56501	Destruction of lesion(s), vulva; simple (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery)
57061	Destruction of vaginal lesion(s); simple (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery)

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Procedure Code	Description
57150	Irrigation of vagina and/or application of medicament for treatment of bacterial, parasitic, or fungoid disease
57170	Diaphragm or cervical cap fitting with instructions
57410	Pelvic examination under anesthesia (other than local)
57455	Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix
58120	Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)
58300	Insertion of intrauterine device (IUD)
58301	Removal of intrauterine device (IUD)
58340	Catheterization and introduction of saline or contrast material for saline infusion sonohysterography (SIS) or hysterosalpingography
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants
58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral
58615	Occlusion of fallopian tube(s) by device (e.g., band, clip, Falope ring) vaginal or suprapubic approach
58661	Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy)
58670	Laparoscopy, surgical; with fulguration of oviducts (with or without transection)
58671	Laparoscopy, surgical; with occlusion of oviducts by device (e.g., band, clip, or Falope ring)
71045	Radiologic examination, chest; single view
72190	Radiologic examination, pelvis; complete, minimum of 3 views
74740	Hysterosalpingography, radiological supervision and interpretation
74742	Transcervical catheterization of fallopian tube, radiological supervision and interpretation
76830	Ultrasound, transvaginal
80048	Basic metabolic panel (Calcium, total)
80050	General health panel
80051	Electrolyte panel
80053	Comprehensive metabolic panel
80061	Lipid panel
80074	Acute hepatitis panel
80076	Hepatic function panel
81000	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, with microscopy
81001	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; automated, with microscopy

in.gov/me	see Procedure Codes That Require NDCs, accessible from the <u>Code Sets</u> page at in.gov/medicaid/providers.	
<b>Procedure Code</b>	Description	
81002	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, without microscopy	
81003	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; automated, without microscopy	
81005	Urinalysis; qualitative or semiquantitative, except immunoassays	
81007	Urinalysis; bacteriuria screen, except by culture or dipstick	
81015	Urinalysis; microscopic only	
81025	Urine pregnancy test, by visual color comparison methods	
81515	Test for detection of bacteria causing vaginosis and vaginitis	
82120	Amines, vaginal fluid, qualitative	
82465	Cholesterol, serum or whole blood, total	
82565	Creatinine; blood	
82670	Estradiol (hormone) level	
82947	Glucose; quantitative, blood (except reagent strip)	
82948	Glucose; blood, reagent strip	
83001	Gonadotropin; follicle stimulating hormone (FSH)	
83020 26	Hemoglobin fractionation and quantitation; electrophoresis (eg, A2, S, C, and/or F); professional fee for interpretation	
83986	pH; body fluid, not otherwise specified	
84181	Protein; Western blot, with interpretation and report, blood or other body fluid	
84181 26	Protein; Western blot, with interpretation and report, blood or other body fluid; professional fee for interpretation	
84450	Transferase; aspartate amino (AST) (SGOT)	
84478	Triglycerides	
84702	Gonadotropin, chorionic (hCG); quantitative	
85004	Blood count; automated differential WBC count	
85007	Blood count; blood smear, microscopic examination with manual differential WBC count	
85008	Blood count; blood smear, microscopic examination without manual differential WBC count	
85009	Blood count; manual differential WBC count, buffy coat	
85013	Blood count; spun microhematocrit	
85014	Blood count; hematocrit (Hct)	
85018	Blood count; hemoglobin (Hgb)	
85025	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count	
85027	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count)	

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Procedure Code	Description
85378	Fibrin degradation products, D-dimer; qualitative or semiquantitative
86255	Fluorescent noninfectious agent antibody; screen, each antibody
86255 26	Fluorescent noninfectious agent antibody; screen, each antibody; professional fee or interpretation
86256	Fluorescent noninfectious agent antibody; titer, each antibody
86256 26	Fluorescent noninfectious agent antibody; titer, each antibody; professional fee or interpretation
86317	Immunoassay for infectious agent antibody, quantitative, not otherwise specified
86318	Immunoassay for infectious agent antibody, qualitative or semiquantitative, single step method (e.g., reagent strip)
86592	Syphilis test, non-treponemal antibody; qualitative (e.g., VDRL, RPR, ART)
86593	Syphilis test, non-treponemal antibody; quantitative
86628	Antibody; Candida
86631	Antibody; Chlamydia
86632	Antibody; Chlamydia, IgM
86687	Antibody; HTLV-I
86688	Antibody; HTLV-II
86689	Antibody; HTLV or HIV antibody, confirmatory test (e.g., Western Blot)
86692	Antibody; hepatitis, delta agent
86694	Antibody; herpes simplex, non-specific type test
86695	Antibody; herpes simplex, type 1
86696	Antibody; herpes simplex, type 2
86701	Antibody; HIV-1
86702	Antibody; HIV-2
86703	Antibody; HIV-1 and HIV-2, single result
86704	Hepatitis B core antibody (HBcAb); total
86705	Hepatitis B core antibody (HBcAb); IgM antibody
86706	Hepatitis B surface antibody (HBsAb)
86707	Hepatitis Be antibody (HBeAb)
86780	Antibody; Treponema pallidum
86787	Antibody; varicella-zoster
86803	Hepatitis C antibody;
86804	Hepatitis C antibody; confirmatory test (e.g., immunoblot)
87070	Culture, bacterial; any other source except urine, blood or stool, aerobic, with isolation and presumptive identification of isolates
87073	Culture, bacterial; quantitative, anaerobic with isolation and presumptive identification of isolates, any source except urine, blood or stool

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Procedure Code	Description
87075	Culture, bacterial; any source, except blood, anaerobic with isolation and presumptive identification of isolates
87076	Culture, bacterial; anaerobic isolate, additional methods required for definitive identification, each isolate
87077	Culture, bacterial; aerobic isolate, additional methods required for definitive identification, each isolate
87081	Culture, presumptive, pathogenic organisms, screening only
87084	Culture, presumptive, pathogenic organisms, screening only; with colony estimation from density chart
87086	Culture, bacterial; quantitative colony count, urine
87088	Culture, bacterial; with isolation and presumptive identification of each isolate, urine
87101	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; skin, hair, or nail
87102	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; other source (except blood)
87109	Culture, mycoplasma, any source
87110	Culture, chlamydia, any source
87140	Culture, typing; immunofluorescent method, each antiserum
87147	Culture, typing; immunologic method, other than immunofluoresence (e.g., agglutination grouping), per antiserum
87149	Culture, typing; identification by nucleic acid (DNA or RNA) probe, direct probe technique, per culture or isolate, each organism probed
87164	Dark field examination, any source (e.g., penile, vaginal, oral, skin); includes specimen collection
87164 26	Dark field examination, any source (e.g., penile, vaginal, oral, skin); includes specimen collection; professional fee or interpretation
87166	Dark field examination, any source (e.g., penile, vaginal, oral, skin); without collection
87181	Susceptibility studies, antimicrobial agent; agar dilution method, per agent (e.g., antibiotic gradient strip)
87184	Susceptibility studies, antimicrobial agent; disk method, per plate (12 or fewer agents)
87185	Susceptibility studies, antimicrobial agent; enzyme detection (e.g., beta lactamase), per enzyme
87186	Susceptibility studies, antimicrobial agent; microdilution or agar dilution [minimum inhibitory concentration (MIC) or breakpoint], each multi-antimicrobial, per plate
87187	Susceptibility studies, antimicrobial agent; microdilution or agar dilution, minimum lethal concentration (MLC), each plate (List separately in addition to code for primary procedure)
87188	Susceptibility studies, antimicrobial agent; macrobroth dilution method, each agent
87205	Smear, primary source with interpretation; Gram or Giemsa stain for bacteria, fungi, or cell types

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<b>Procedure Code</b>	Description
87206	Smear, primary source with interpretation; fluorescent and/or acid fast stain for bacteria, fungi, parasites, viruses or cell types
87207	Smear, primary source with interpretation; special stain for inclusion bodies or parasites (e.g., malaria, coccidia, microsporidia, trypanosomes, herpes viruses)
87207 26	Smear, primary source with interpretation; special stain for inclusion bodies or parasites (e.g., malaria, coccidia, microsporidia, trypanosomes, herpes viruses); professional fee or interpretation
87210	Smear, primary source with interpretation; wet mount for infectious agents (e.g., saline, India ink, KOH preps)
87220	Tissue examination by KOH slide of samples from skin, hair, or nails for fungi or ectoparasite ova or mites (eg, scabies)
87255	Virus isolation; including identification by non-immunologic method, other than by cytopathic effect (e.g., virus specific enzymatic activity)
87270	Infectious agent antigen detection by immunofluorescent technique; Chlamydia trachomatis
87273	Infectious agent antigen detection by immunofluorescent technique; Herpes simplex virus type 2
87274	Infectious agent antigen detection by immunofluorescent technique; Herpes simplex virus type 1
87285	Infectious agent antigen detection by immunofluorescent technique; Treponema pallidum
87320	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; Chlamydia trachomatis
87340	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; hepatitis B surface antigen (HBsAg)
87341	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; hepatitis B surface antigen (HBsAg) neutralization
87350	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; hepatitis Be antigen (HBeAg)
87390	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; HIV-1
87391	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semiquantitative, multiple-step method; HIV-2
87449	Infectious agent antigen detection by enzyme immunoassay technique qualitative or semiquantitative; multiple step method, not otherwise specified, each organism
87480	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, direct probe technique
87481	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, amplified probe technique
87482	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, quantification

#### Note: For procedure codes that must be billed with the appropriate National Drug Code (NDC), see Procedure Codes That Require NDCs, accessible from the Code Sets page at in.gov/medicaid/providers. **Procedure Code** Description 87483 Infectious agent detection by nucleic acid (DNA or RNA); central nervous system pathogen (eg, Neisseria meningitidis, Streptococcus pneumoniae, Listeria, Haemophilus influenzae, E. coli, Streptococcus agalactiae, enterovirus, human parechovirus, herpes simplex virus type 1 and 2, human herpesvirus 6, cytomegalovirus, varicella zoster virus, Cryptococcus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12-25 targets 87485 Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, direct probe technique 87486 Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, amplified probe technique 87487 Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, quantification 87490 Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, direct probe technique Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, 87491 amplified probe technique 87492 Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, quantification 87510 Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, direct probe technique 87511 Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, amplified probe technique 87512 Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, quantification 87516 Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, amplified probe technique 87517 Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, quantification 87521 Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, amplified probe technique, includes reverse transcription when performed Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, quantification, 87522 includes reverse transcription when performed 87528 Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, direct probe technique Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, amplified 87529 probe technique Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, 87530 quantification 87531 Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, direct probe technique 87532 Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, amplified probe technique 87533 Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, quantification

Reviewed/Opdated: May 29, 2025		
see Proce	<i>Note:</i> For procedure codes that must be billed with the appropriate National Drug Code (NDC), see Procedure Codes That Require NDCs, accessible from the <u>Code Sets</u> page at in.gov/medicaid/providers.	
Procedure Code	Description	
87534	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique	
87535	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe technique, includes reverse transcription when performed	
87536	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification, includes reverse transcription when performed	
87537	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, direct probe technique	
87538	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, amplified probe technique, includes reverse transcription when performed	
87539	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, quantification, includes reverse transcription when performed	
87563	Detection of Mycoplasma genitalium by DNA or RNA probe	
87590	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique	
87591	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique	
87592	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, quantification	
87593	Detection of orthopoxvirus	
87624	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), high-risk types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68)	
87625	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), types 16 and 18 only, includes type 45, if performed	
87626	Detection test by nucleic acid for Human Papillomavirus (HPV), separately reported high- risk types	
87660	Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, direct probe technique	
87661	Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, amplified probe technique	
87797	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; direct probe technique, each organism	
87798	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism	
87799	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; quantification, each organism	
87800	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique	
87801	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; amplified probe(s) technique	
87808	Infectious agent antigen detection by immunoassay with direct optical observation; Trichomonas vaginalis	

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Procedure Code	Description
87810	Infectious agent antigen detection by immunoassay with direct optical observation; Chlamydia trachomatis
87850	Infectious agent antigen detection by immunoassay with direct optical observation; Neisseria gonorrhoeae
87901	Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV-1, reverse transcriptase and protease regions
87902	Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis C virus
87903	Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; first through 10 drugs tested
87904	Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; each additional drug tested (list separately in addition to code for primary procedure)
87912	Infectious agent genotype analysis by nucleic acid (DNA or RNA); hepatitis B virus
88141	Cytopathology, cervical or vaginal (any reporting system), requiring interpretation by physician
88142	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; manual screening under physician supervision
88143	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with manual screening and rescreening under physician supervision
88147	Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision
88148	Cytopathology smears, cervical or vaginal; screening by automated system with manual rescreening under physician supervision
88150	Cytopathology, slides, cervical or vaginal; manual screening under physician supervision
88152	Cytopathology, slides, cervical or vaginal; with manual screening and computer-assisted rescreening under physician supervision
88153	Cytopathology, slides, cervical or vaginal; with manual screening and rescreening under physician supervision
88155	Cytopathology, slides, cervical or vaginal, definitive hormonal evaluation (e.g., maturation index, karyopyknotic index, estrogenic index) (List separately in addition to code[s] for other technical and interpretation services)
88160	Cytopathology, smears, any other source; screening and interpretation
88161	Cytopathology, smears, any other source; preparation, screening and interpretation
88162	Cytopathology, smears, any other source; extended study involving over 5 slides and/or multiple stains
88164	Cytopathology, slides, cervical or vaginal (the Bethesda System); manual screening under physician supervision
88165	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and rescreening under physician supervision

<i>Note:</i> For procedure codes that must be billed with the appropriate National Drug Code (NDC), see Procedure Codes That Require NDCs, accessible from the <u>Code Sets</u> page at in.gov/medicaid/providers.		
Procedure Code	Description	
88166	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening under physician supervision	
88167	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening using cell selection and review under physician supervision	
88174	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; screening by automated system, under physician supervision	
88175	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with screening by automated system and manual rescreening or review, under physician supervision	
90460	Administration of first vaccine or toxoid component with counseling (18 years or younger)	
90461	Administration of vaccine or toxoid component with counseling (18 years or younger), each additional vaccine or toxoid component	
90611	Smallpox and monkeypox vaccine, attenuated vaccinia virus, live, non-replicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous use	
90622	Vaccinia (smallpox) virus vaccine, live, lyophilized, 0.3 mL dosage, for percutaneous use	
96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	
98000 FP	New patient synchronous audio-video visit with straightforward medical decision making, if using time 15 minutes or more	
98001 FP	New patient synchronous audio-video visit with low medical decision making, if using time 30 minutes or more	
98002 FP	New patient synchronous audio-video visit with moderate medical decision making, if using time 45 minutes or more	
98003 FP	New patient synchronous audio-video visit with high medical decision making, if using time 60 minutes or more	
98004 FP	Established patient synchronous audio-video visit with straightforward medical decision making, if using time 10 minutes or more	
98005 FP	Established patient synchronous audio-video visit with low medical decision making, if using time 20 minutes or more	
98006 FP	Established patient synchronous audio-video visit with moderate medical decision making, if using time 30 minutes or more	
98007 FP	Established patient synchronous audio-video visit with high medical decision making, if using time 40 minutes or more	
98008 FP	New patient synchronous audio-only visit with straightforward medical decision making and 10 minutes or more of medical discussion, if using time 15 minutes or more	
98009 FP	New patient synchronous audio-only visit with low medical decision making and 10 minutes or more of medical discussion, if using time 30 minutes or more	
98012 FP	Established patient synchronous audio-only visit with straightforward medical decision making and 10 minutes or more of medical discussion, if using time 10 minutes or more	

Note: For procedure codes that must be billed with the appropriate National Drug Code (NDC), see Procedure Codes That Require NDCs, accessible from the <u>Code Sets</u> page at in.gov/medicaid/providers.	
Procedure Code	Description
98013 FP	Established patient synchronous audio-only visit with low medical decision making and 10 minutes or more of medical discussion, if using time 20 minutes or more
98960	Self-management education & training, face-to-face, 1 patient
98961	Self-management education & training, face-to-face, 2-4 patients
98962	Self-management education & training, face-to-face, 5-8 patients
99000	Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory
99001	Handling and/or conveyance of specimen for transfer from the patient in other than a physician's office to a laboratory (distance may be indicated)
99202 FP	New patient office or other outpatient visit with straightforward medical decision making, if using time, 15 minutes or more [Family Planning]
99203 FP	New patient office or other outpatient visit with low level of medical decision making, if using time, 30 minutes or more [Family Planning]
99204 FP	New patient office or other outpatient visit with moderate level of medical decision making, if using time, 45 minutes or more [Family Planning]
99205 FP	New patient office or other outpatient visit with a high level of medical decision making, if using time, 60 minutes or more [Family Planning]
99211 FP	Office or other outpatient visit for the evaluation and management of established patient that may not require the presence of healthcare professional. [Family Planning]
99212 FP	Established patient office or other outpatient visit with straightforward medical decision making, if using time, 10 minutes or more [Family Planning]
99213 FP	Established patient office or other outpatient visit with low level of decision making, if using time, 20 minutes or more [Family Planning]
99214 FP	Established patient office or other outpatient visit with moderate level of decision making, if using time, 30 minutes or more [Family Planning]
99215 FP	Established patient office or other outpatient visit with high level of medical decision making, if using time, 40 minutes or more [Family Planning]
99459	Pelvic exam
A4261	Cervical cap for contraceptive use
A4264	Permanent implantable contraceptive intratubal occlusion device(s) and delivery system
A4266	Diaphragm for contraceptive use
A4267	Contraceptive supply, condom, male, each
A4268	Contraceptive supply, condom, female, each
A4269	Contraceptive supply, spermicide (e.g., foam, gel), each
G0433	Infectious agent antibody detection by enzyme-linked immunosorbent assay (ELISA) technique, HIV-1 and/or HIV-2, screening
G0567	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, screening, amplified probe technique
J0290	Injection, ampicillin sodium, 500 mg
J0291	Injection, plazomicin, 5 mg

	Reviewed/Updated: May 29, 2025
see Procee	dure codes that must be billed with the appropriate National Drug Code (NDC), dure Codes That Require NDCs, accessible from the <u>Code Sets</u> page at dicaid/providers.
Procedure Code	Description
J0456	Injection, azithromycin, 500 mg
J0561	Injection, penicillin G benzathine, 100,000 units
J0696	Injection, ceftriaxone sodium, per 250 mg
J0697	Injection, sterile cefuroxime sodium, per 750 mg
J0698	Injection, cefotaxime sodium, per g
J0744	Injection, ciprofloxacin for intravenous infusion, 200 mg
J1050	Injection, medroxyprogesterone acetate, 1 mg
J1885	Injection, ketorolac tromethamine, per 15 mg
J1956	Injection, levofloxacin, 250 mg
J3490	Unclassified drugs
J7294	Segesterone acetate and ethinyl estradiol 0.15mg, 0.013mg per 24 hours; yearly vaginal system, each
J7295	Ethinyl estradiol and etonogestrel 0.015mg, 0.12mg per 24 hours; monthly vaginal ring, each
J7296	Levonorgestrel-releasing intrauterine contraceptive system, (kyleena), 19.5 mg
J7297	Levonorgestrel-releasing intrauterine contraceptive system, 52 mg, 3 year duration
J7298	Levonorgestrel-releasing intrauterine contraceptive system, 52 mg, 5 year duration
J7300	Intrauterine copper contraceptive
J7301	Levonorgestrel-releasing intrauterine contraceptive system, 13.5 mg
J7304	Contraceptive supply, hormone containing patch, each
J7306	Levonorgestrel (contraceptive) implant system, including implants and supplies
J7307	Etonogestrel (contraceptive) implant system, including implant and supplies
J8499	Prescription drug, oral, non chemotherapeutic, not otherwise specified
S4993	Contraceptive pills for birth control
	Table 2 Revision History
99211–992 May 27, 2025, upda	<i>tte:</i> ctive October 1, 2024): 71046, 94760, 99202–99205 <i>without FP modifier</i> , 215 <i>without FP modifier</i> , 99281–99285, 99341, 99342, 99344, 99345, 99347–99350, M0201 <i>tte:</i> ve June 27, 2024): G0567
Removed (effe December 5, 2024,	•
87811, 879 Removed (effe	ctive October 1, 2024): 86408, 86409, 86328, 86769, 87426, 87428, 87635, 87636, 87637, 913, 90480, 91304, 91320, 91322, 0240U, 0241U, U0001, U0002 ctive January 1, 2024): C9803
	<i>update:</i> <i>The January 1, 2024): 99459</i> <i>Detion (effective January 1, 2024): 87593, 91304, 99202–99205, 99211–99215, M0201</i>

#### **Table 2 Revision History** December 28, 2023, update: Removed (effective November 1, 2023): 91312, 91313, 0041A, 0042A, 0044A, 0121A, 0124A, 0134A November 30, 2023, update: Added temporarily (effective September 11, 2023): 90480, 91320, 91322 October 24, 2023, update: Added temporarily (effective April 18, 2023): 0121A July 25, 2023, update: Removed (effective May 22, 2023): 91303, 0031A, 0034A June 13, 2023, update: Removed (effective April 18, 2023): 91300, 91301, 91305, 91306, 91309, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0051A, 0052A, 0053A, 0054A, 0064A, 0094A *May 2, 2023, update:* Added (effective May 2, 2023): G0433 *April 1, 2023, update:* Removed (effective May 12, 2023): G2023, G2024, U0003, U0004, U0005 February 28, 2023, update: Removed (effective January 1, 2023): 99343 Revised descriptions (effective January 1, 2021): 99281–99285, 99341, 99342, 99344, 99345, 99347–99350 November 29, 2022, update: Added temporarily (effective October 19, 2022): 0044A November 17, 2022, update: Added temporarily (effective August 31, 2022): 91312, 91313, 0124A, 0134A November 10, 2022, update: Added (effective July 26, 2022): 87593, 90460, 90461, 90611, 90622 August 25, 2022, update: Added temporarily (effective July 13, 2022): 91304 Added temporarily (effective July 13, 2022): 0041A, 0042A Julv 1. 2022, update: Added temporarily (effective February 21, 2022): 87913 May 17, 2022, update: Added temporarily (effective March 29, 2022): 91309, 0094A March 3, 2022, update: Added temporarily (effective October 29, 2021): 91305, 0051A, 0052A, 0053A, 0054A December 24, 2021, update: Added temporarily (effective December 24, 2021): 0240U, 0241U November 16, 2021, update: Added temporarily (effective October 20, 2021): 91306, 0034A, 0064A Added temporarily (effective September 22, 2021): 0004A October 1, 2021, update: Added (effective October 1, 2021): J7294, J7295 Removed (effective October 1, 2021): J7303 August 24, 2021, update: Added temporarily (effective August 12, 2021): 0003A, 0013A July 1, 2021, update: Added temporarily (effective June 8, 2021): M0201 March 30, 2021, update: Added temporarily (effective February 27, 2021): 91303, 0031A March 23, 2021, update: Revised descriptions (effective January 1, 2021): 99202-99205, 99211-99215 February 9, 2021, update: Removed (effective January 1, 2021): 99201 FP [as well as temporary coverage for 99201 without modifier] Added temporarily (effective January 1, 2021): U0005 Added temporarily (effective November 10, 2020): 87428

#### Table 2 Revision History

December 29, 2020, update:
Added temporarily (effective December 18, 2020): 91301, 0011A, 0012A
Added temporarily (effective December 11, 2020): 91300, 0001A, 0002A
November 24, 2020, update:
Added temporarily (effective October 6, 2020): 87636, 87637, 87811
October 1, 2020, update:
Added temporarily (effective August 10, 2020): 86408, 86409
August 18, 2020, update:
Added temporarily (effective June 25, 2020): 87426
May 26, 2020, update:
Added temporarily (effective March 18, 2020): 71046, 94760, 99201–99205 [without FP modifier], 99211–99215 [without FP modifier], 99281–99285, 99341–99345, 99347–99350
May 14, 2020, update:
Added temporarily (effective March 1, 2020): C9803
April 28, 2020, update:
Added temporarily (effective April 10, 2020): 86328, 86769
Added temporarily (effective March 18, 2020): U0003, U0004
April 21, 2020, update:
Added temporarily (effective March 13, 2020): 87635
Added temporarily (effective March 1, 2020): G2023, G2024 Added temporarily (effective February 4, 2020): U0001, U0002
<i>January 1, 2020, update:</i> Added (effective January 1, 2020): 87563, 0567T
October 1, 2019, update:
Added (effective October 1, 2019): J0291
July 18, 2019, update:
Added (effective July 18, 2019): 58661
July 1, 2018, update:
Added (effective July 1, 2018): 98960–98962
March 6, 2018, update:
Added (effective January 1, 2018): 71045
January 1, 2018, update:
Added (effective January 1, 2018): 0500T, J7296 Removed (effective January 1, 2018): 71015, 88154, Q9984
<i>July 1, 2017, update:</i> Consolidated all procedure code tables for the Family Planning Eligibility Program into one table
Added (effective July 1, 2017): Q9984
Added (effective January 1, 2017): 85378
January 1, 2017, update:
Added (effective January 1, 2017): 87483
Added (effective June 1, 2014): 55250
April 1, 2016 update:
Added (effective January 1, 2015): 87624, 87625
Added (effective September 1, 2014): J8499
Added (effective January 1, 2013): J3490