

Medical Abortion Coding by State and Payer

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California

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Medi-Cal (California Medicaid)	Mifepristone is covered to the same extent as surgical abortions. Medi-Cal covers all abortion services for eligible women.	Provision of Mifepristone is covered as a bundled rate, including office visits and associated services and supplies (excluding the drugs), using the local code S0199. The reimbursement rate for this code is \$383.10 for physicians and \$402.34 for clinics. The drugs are reimbursed separately using local codes S0190 for Mifepristone and S0191 for misoprostol. The reimbursement rate for Mifepristone is \$85.50 and the rate for misoprostol is \$1.02.	The services included in Z0336 include two visits and two ultrasounds, laboratory studies, urine pregnancy test, and recipient education.
Pacificare	Mifepristone is covered to the same extent as surgical abortion.	Physicians receive a monthly payment per enrollee that covers all professional services (capitation). All abortion services including provision of Mifepristone are included under the capitation.	Some medical groups may provide abortion services internally or they may subcontract with outside providers. For subcontractors, specific payment rates are negotiated with individual medical groups.

Connecticut

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Anthem Blue Cross and Blue Shield	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted for reimbursement using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners and ob/gyns are covered.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Healthnet	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code J8499. The claim form must include the name of the drug, the NDC number, and the dosage. Providers should use regular E&M codes for office visits.	Healthnet will reimburse family practitioners. Under the Passport plan, if a family practitioner is providing Mifepristone, but is not the primary care provider for the patient, a referral (either prescription or telephone) will be needed. Under the Charter plan, no such referral is needed.
Medicaid	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S01091. The office visits and other related services should be billed using S0199. The drugs will be paid at the AWP minus 5%.	Family practitioners are covered. No referral is needed if the family practitioner is not the patient's primary care physician.

Payer	Coverage	Reimbursement	Other
MedSpan Health Options	Mifepristone is covered to the same extent as surgical abortion.	Claims are to be submitted using either J3490, J8499, or CPT code 99070. Ultrasounds are billed separately.	Ob/gyns and family practitioners are covered. No referral is needed if the family practitioner is not the patient's primary care physician.
Oxford	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone is covered using code S0199 for the procedure, S0190 for Mifepristone and S0191 for Misoprostol. Primary care physicians, including family practitioners, can bill for the service. The mifepristone claim should include the NDC# 64875-001-03. Office visits, ultrasound, and other ancillary services are billed separately and are reimbursed based on the regular fee schedule.	
United HealthCare	Mifepristone is covered to the same extent as surgical abortion.	Office visits should be billed using normal E&M codes and are paid at regular office visit rates. Providers should submit claims for Mifepristone using code J8499. All other services (i.e., ultrasounds) can be submitted separately and will be paid according to the normal fee-for-service rates.	

District of Columbia

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Optimum Choice	Mifepristone is covered to the same extent as surgical abortion.	Office visits are covered using regular E&M codes. Providers should use S0190 to be reimbursed for Mifepristone and S0191 to be reimbursed for misoprostol.	Ob/gyns and family practitioners are covered. However, if the family practitioner is not the patient's primary care physician, there is no coverage.

Florida

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

Illinois

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Blue Cross and Blue Shield of Illinois	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for the office visits uses E/M codes. The drugs are reimbursed using HCPCS code S0190 for Mifepristone and S0191 for misoprostol. All other services are reimbursed separately, if medically necessary.	The reimbursement rate for Mifepristone is based on the Average Wholesale Price (AWP).
CIGNA	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Illinois Medicaid	Mifepristone is covered to the same extent as surgical abortions. State Medicaid funds are available in cases where the health or life of the mother is endangered, rape, or incest.	Physicians are paid a global rate of \$125 for the 3 office visits. The physician may bill after the first visit. The codes for the visits are: W7579 (health endangered), W7576 (life endangered), W7577 (rape) and W7578 (incest). Mifepristone will be reimbursed at \$324 and should be billed using HCPCS code S0190. Misoprostol should be billed using HCPCS code S0191. Any other procedures or tests (such as ultrasound) should be billed using the applicable CPT code and will be reimbursed using the normal fee schedule.	Click here for a link to the Illinois Medical Assistance Program Provider Bulletin dated 4/18/01, "Coverage of the Drug Mifepristone for Termination of Pregnancy". Coverage is retroactive to September 28th, 2000.

Payer	Coverage	Reimbursement	Other
John Deere Health	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted using code S0190 and misoprostol using code S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. If a patient obtains Mifepristone from a family practitioner who is not her PCP, a referral is needed if the doctor is out of network. If the doctor is in-network, a referral is needed if the patient is in the Select Plan. If the patient is in the Choice Plan, and the doctor is in-network, no referral is needed.
UnitedHealthcare of the Midwest	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for the office visits uses E/M codes. The drugs are reimbursed using code J3490. All other services are reimbursed separately, if medically necessary.	The reimbursement rate for Mifepristone varies based on the contract.

Kentucky

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Anthem Blue Cross and Blue Shield	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted for reimbursement using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners and ob/gyns are covered.
CIGNA	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

Louisiana

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
United HealthCare	Mifepristone is covered to the same extent as surgical abortions.	Office visits are to be billed using E&M codes. The drugs are submitted under J3490.	Family practitioners and ob/gyns are covered. United HealthCare will not reimburse if Mifepristone is given to someone whose pregnancy is past 49 days LMP.

Maryland

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Anthem Blue Cross and Blue Shield	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted for reimbursement using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners and ob/gyns are covered.
CIGNA	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Maryland Medical Assistance Program	Mifepristone is covered to the same extent as surgical abortions	Providers should use S0190 for Mifepristone and S0191 for misoprostol. Do not bill these drugs on the same date of service as a surgical abortion.	

Massachusetts

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Blue Cross and Blue Shield of Massachusetts	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
Boston Medical Center Healthnet Plan	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Consolidated Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	

Payer	Coverage	Reimbursement	Other
Fallon Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Guardian	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	Ob/gyns and family practitioners are covered.
Harvard Pilgrim Health Care	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
Health Care Value Management	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
Massachusetts Medicaid (Mass Health)	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	

Payer	Coverage	Reimbursement	Other
Neighborhood Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
Network Health	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
Pioneer	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
Tufts Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	

Missouri

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Preferred Health Systems	Mifepristone is covered to the same extent as surgical abortion.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Ob/gyns and family practitioners are covered. In the HMO plan, a family practitioner cannot refer to another family practitioner.
United Healthcare of the Midwest	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for the office visits uses E/M codes. The drugs are reimbursed using code J3490. All other services are reimbursed separately, if medically necessary.	The reimbursement rate for Mifepristone varies based on the contract.

Nebraska

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Preferred Health Systems	Mifepristone is covered to the same extent as surgical abortion.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Ob/gyns and family practitioners are covered. In the HMO plan, a family practitioner cannot refer to another family practitioner.

New Hampshire

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Anthem Blue Cross and Blue Shield	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted for reimbursement using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners and ob/gyns are covered.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

New Jersey

Payer	Coverage	Reimbursement	Other
1199 Health and Human Services Employees Union	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code W0486. Providers should use regular E&M codes for office visits. Office visits and related services should be billed separately.	Both OB/GYNs and family practitioners will be reimbursed. If a family practice physician is providing Mifepristone, but is not the primary care provider for the patient, a referral is not needed if the family practice physician is a member of the PPO.
21st Century Health & Benefits	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Ob/gyns and family practitioners are covered. No referrals for FPs are needed.
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
AmeriHealth	Mifepristone is covered to the same extent as surgical abortion.	Associated office visits and supplies are covered as a bundled rate with code S0199. Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S0191. Mifepristone will be reimbursed at the AWP minus 10%.	Family practitioners and ob/gyns are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

Payer	Coverage	Reimbursement	Other
Healthnet	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code J8499. The claim form must include the name of the drug, the NDC number, and the dosage. Providers should use regular E&M codes for office visits.	Healthnet will reimburse family practitioners. Under the Passport plan, if a family practitioner is providing Mifepristone, but is not the primary care provider for the patient, a referral (either prescription or telephone) will be needed. Under the Charter plan, no such referral is needed.
Horizon Blue Cross and Blue Shield of New Jersey	Mifepristone is covered to the same extent as surgical abortion.	Office visits should be billed using normal E&M codes and will be paid at regular office visit rates. Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S0191. All other services (i.e., ultrasounds) can be submitted separately and will be paid according to the normal fee-for-service rates.	
Oxford	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone is covered using code S0199 for the procedure, S0190 for Mifepristone and S0191 for Misoprostol. Primary care physicians, including family practitioners, can bill for the service. The mifepristone claim should include the NDC# 64875-001-03. Office visits, ultrasound, and other ancillary services are billed separately and are reimbursed based on the regular fee schedule.	
United HealthCare	Mifepristone is covered to the same extent as surgical abortion.	Office visits should be billed using normal E&M codes and will be paid at regular office visit rates. Providers should submit claims for Mifepristone using code J8499. All other services (i.e., ultrasounds) can be submitted separately and will be paid according to the normal fee-for-service rates.	

New Mexico

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Blue Cross and Blue Shield of New Mexico	Mifepristone is covered to the same extent as surgical abortions.	Providers should bill for the drugs using codes J8499, J3490, or CPT code 99070. Claims are reviewed and paid manually. Office visits and all other services are paid separately.	Providers should inform Blue Cross of their intention to provide this service. The drugs will be reimbursed based on the Average Wholesale Price (AWP).
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
New Mexico Medicaid	Mifepristone is covered to the same extent as surgical abortion.	Office visits are reimbursed using general office visit codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	New Mexico Medicaid only covers abortions that are deemed medically necessary.
Presbyterian	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone and misoprostol using code J8499. Please list "Mifepristone" on the claim next to the J code. Providers should use regular E&M codes for office visits.	Both OB/GYNs and family practitioners will be reimbursed.

Payer	Coverage	Reimbursement	Other
United Healthcare	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S0191. Providers should use regular E&M codes for office visits. The drug will be paid at the AWP, or the AWP plus or minus 10%, depending on the provider's contract.	Both OB/GYNs and family practitioners will be reimbursed.

New York

Payer	Coverage	Reimbursement	Other
1199 Health and Human Services Employees Union	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code W0846. Providers should use regular E&M codes for office visits. Office visits and related services should be billed separately.	Both OB/GYNs and family practitioners will be reimbursed. If a family practice physician is providing Mifepristone, but is not the primary care provider for the patient, a referral is not needed if the family practice physician is a member of the PPO.
21st Century Health & Benefits	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Ob/gyns and family practitioners are covered. No referrals for FPs are needed.
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Empire Blue Cross and Blue Shield	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone will be covered as a bundled rate, which includes the office visits and the drug cost. The bundled rate for Mifepristone will be paid at the same rate for induced termination of pregnancy by dilation and evacuation. Providers can bill using one of 2 CPT codes: 59899 (unlisted procedure, maternity care and delivery) or 58999 (unlisted procedure, female genital system, non-obstetrical). If a physician uses ultrasound, the ultrasound will be billed separately.	Family practitioners and ob/gyns are covered. In the HMO plan, a referral is needed if the family practitioner is not the patient's primary care physician. No referral is needed for the PPO plan, even if the doctor is not in network.

Payer	Coverage	Reimbursement	Other
Empire Plan (not to be confused with Empire Blue Cross/Blue Shield)	Covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use J3490 for Mifepristone and misoprostol. The J3490 code must be accompanied by a description of the medication.	
Excellus (Blue Cross and Blue Shield of Rochester, Central NY, Utica & Watertown)	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate including office visits and associated supplies with the HCPCS code S0199. The drugs are reimbursed separately at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol.	
GHI (Group Health Inc.)	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using E/M codes. The drug is reimbursed as a pass through based on the invoice cost using a local code, 4849A.	Family practitioners are not covered.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Guardian Life Insurance	Mifepristone is covered to the same extent as surgical abortions.	The office visits and associated supplies are reimbursed as a bundled rate with the code S0199. Drugs are reimbursed separately at invoice cost using code S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. In the HMO plan a referral is needed if the family practitioner is not the patient's primary care physician. In the PPO Plan, no referral is needed.
HealthFirst	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S0191. Providers should use regular E&M codes for office visits. The drugs will be paid at the AWP.	Family practitioners are covered. No referral is needed if a patient obtains Mifepristone from a family practitioner who is not her regular PCP.
Healthnet	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code J8499. The claim form should include the name of the drug, the NDC number and the dosage. Providers should use regular E&M codes for office visits.	Healthnet will reimburse family practitioners. Under the Passport plan, if a family practitioner is providing Mifepristone, but is not the primary care provider for the patient, a referral (either prescription or telephone) will be needed. Under the Charter plan, no such referral is needed.

Payer	Coverage	Reimbursement	Other
HIP	Mifepristone is covered to the same extent as surgical abortions.	Office visits should be billed using normal E&M codes and will be paid at regular office visit rates. Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S0191. All other services (i.e., ultrasounds) can be submitted separately and will be paid according to the normal fee-for-service rates.	Family practitioners are not covered.
MVP	Mifepristone is covered to the same extent as surgical abortion.	Office visits are billed using regular E&M codes. The drugs should be submitted under J8499.	Both OB/GYNs and family practitioners will be reimbursed. If a patient visits a family practitioner who is not her regular PCP, a referral is needed or else the patient can temporarily change her PCP. MVP will not reimburse if Mifepristone is given to someone whose pregnancy is past 49 days LMP.
New York Medicaid	Mifepristone is covered to the same extent as surgical abortions. New York City (NYC) covers all elective abortions with 100% NYC funding; the rest of New York state covers all medically necessary abortions with 100% state funding.	Office visits in physicians' offices are paid at the standard office visit rate of \$30; for office visits to a clinic, payment will be based on the clinic visit rate of \$60-\$80. The drug cost will be reimbursed as a pass through based on the invoice cost.	To obtain full reimbursement for the Mifepristone regimen, 2 separate claims need to be submitted. One claim contains the office visits and other ancillary services; the second claim should be submitted for the drugs (Mifepristone and misoprostol). The drug claim is submitted using the following codes: Procedure code S0190 should be used to bill for Mifepristone and Procedure code S0191 should be used to bill for misoprostol. Diagnostic and Treatment centers should use the Referred Ambulatory Category of Service (0163) and hospital based clinics should use the Hospital Ordered Ambulatory Category of Service (0282). The total cost of the drugs should be included on the claim form.

Payer	Coverage	Reimbursement	Other
Oxford	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone is covered using code S0199 for the procedure, S0190 for Mifepristone and S0191 for Misoprostol. Primary care physicians, including family practitioners, can bill for the service. The mifepristone claim should include the NDC# 64875-001-03. Office visits, ultrasound, and other ancillary services are billed separately and are reimbursed based on the regular fee schedule.	
United HealthCare	Mifepristone is covered to the same extent as surgical abortion.	Office visits should be billed using normal E&M codes and will be paid at regular office visit rates. Providers should submit claims for Mifepristone using code J8499. All other services (i.e., ultrasounds) can be submitted separately and will be paid according to the normal fee-for-service rates.	
Vytra Health Plans	Mifepristone is covered to the same extent as surgical abortion. Only the Medicaid plan covers abortion.	Providers submit claims using Mifepristone NDC code: 6487500103. Mifepristone is reimbursed at full invoice price. Office visits and ultrasound are reimbursed according to fee schedule.	

Ohio

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Anthem Blue Cross and Blue Shield	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone should be submitted for reimbursement using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners and ob/gyns are covered.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Medical Mutual	Mifepristone is covered to the same extent as surgical abortions.	Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S01091. The office visits and other related services should be billed using Evaluation and Management codes.	

Pennsylvania

Payer	Coverage	Reimbursement	Other
21st Century Health & Benefits	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Ob/gyns and family practitioners are covered. No referrals for FPs are needed.
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
AmeriHealth	Mifepristone is covered to the same extent as surgical abortion.	Associated office visits and supplies are covered as a bundled rate using code S0199. Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S0191. Mifepristone will be reimbursed at the AWP minus 10%.	Family practitioners and ob/gyns are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Blue Cross of Northeastern Pennsylvania	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for the office visits uses E/M codes. The drugs are reimbursed using CPT code 59899 (unlisted procedure, maternity care and delivery). All other services are reimbursed separately, if medically necessary.	
Blue Cross/Blue Shield of Western Pennsylvania	Mifepristone is covered to the same extent as surgical abortion, depending on the member's contract.	Providers should submit claims for Mifepristone using code S0190 and for misoprostol using S0191. The drugs will be paid based on the AWP. The office visits and other related services should be billed using S0199. Coverage for the medication and procedure falls under the maternity benefit.	
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.

Payer	Coverage	Reimbursement	Other
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Healthnet	Mifepristone is covered to the same extent as surgical abortion.	Providers should submit claims for Mifepristone using code J8499. The claim form must include the name of the drug, the NDC number and the dosage. Providers should use regular E&M codes for office visits.	Healthnet will reimburse family practitioners. Under the Passport plan, if a family practitioner is providing Mifepristone, but is not the primary care provider for the patient, a referral (either prescription or telephone) will be needed. Under the Charter plan, no such referral is needed.
Highmark Blue Cross/Blue Shield	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP. If claim submission is by paper, no narrative is needed. If the submission is electronic, the S0199 code must be accompanied by a description of what the S code is for.
Keystone Health Plan	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone is submitted using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Oxford	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone is covered using code S0199 for the procedure, S0190 for Mifepristone and S0191 for Misoprostol. Primary care physicians, including family practitioners, can bill for the service. The mifepristone claim should include the NDC# 64875-001-03. Office visits, ultrasound, and other ancillary services are billed separately and are reimbursed based on the regular fee schedule.	
Pennsylvania Medicaid	Mifepristone is covered to the same extent as surgical abortion.	Office visits should be submitted using regular E&M codes. Mifepristone should be submitted using NDC #64875-0001-03. Misoprostol should be submitted using NDC #00025-1451-20/34-60 for 100 mcg tablets and NDC #00025-1451-31/34/60 for 200 mcg tablets.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

Payer	Coverage	Reimbursement	Other
Personal Choice	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using code S0190 and misoprostol using code S0191. Office visits and associated supplies are covered as a bundled rate using code S0199.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.

Rhode Island

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Blue Cross and Blue Shield of Rhode Island	Mifepristone is covered to the same extent as surgical abortions.	Provision of Mifepristone is covered as a bundled rate for the office visits and the drugs using a modified NDC code, 64875001. The reimbursement rate for the Mifepristone regimen is based on the specific contract and provider. Ultrasounds are reimbursed separately, if medically necessary.	
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Oxford	Mifepristone is covered to the same extent as surgical abortions.	Mifepristone is covered using code S0199 for the procedure, S0190 for Mifepristone and S0191 for Misoprostol. Primary care physicians, including family practitioners, can bill for the service. The mifepristone claim should include the NDC# 64875-001-03. Office visits, ultrasound, and other ancillary services are billed separately and are reimbursed based on the regular fee schedule.	

South Carolina

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Blue Cross of South Carolina	Mifepristone is covered to the same extent as surgical abortions.	Providers should use any of the "J" codes to submit claims. There is a global reimbursement rate that includes Mifepristone at AWP plus 15%, office visits and ultrasound.	All Mifepristone claims will be manually processed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

Tennessee

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Blue Cross and Blue Shield of Tennessee	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for the office visits uses E/M codes. The drugs are reimbursed at invoice cost using HCPCS code S0190 for Mifepristone and S0191 for misoprostol. All other services are reimbursed separately, if medically necessary.	
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
John Deere Health	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using code S0190 and misoprostol using code S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. If a patient obtains Mifepristone from a family practitioner who is not her PCP, a referral is needed if the doctor is out of network. If the doctor is in-network, a referral is needed if the patient is in the Select Plan. If the patient is in the Choice Plan, and the doctor is in-network, no referral is needed.

Texas

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
Blue Cross and Blue Shield of Texas	Mifepristone is covered to the same extent as surgical abortions. Most plans do not cover any abortions.	Reimbursement for the office visits uses E/M codes. The drugs are reimbursed separately using HCPCS code S0190 for Mifepristone and S0191 for misoprostol. All other services are reimbursed separately, if medically necessary.	The reimbursement rate for Mifepristone and misoprostol is based on the Average Wholesale Price (AWP) plus 10%.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

Utah

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.

Virginia

Payer	Coverage	Reimbursement	Other
Aetna US Healthcare	Mifepristone is covered to the same extent as surgical abortions.	Reimbursement for a patient's non-primary care physician uses E/M codes for office visits; the drug is reimbursed using code J3490 and is paid based on the physician's invoice cost. If the patient's primary care physician is providing Mifepristone and s/he is capitated, the office visits are under the capitation. The drug cost is reimbursed separately based on the invoice cost.	OB/GYNS will not need a referral to provide Mifepristone to their patients. If an internist or family practice physician is providing Mifepristone but s/he is not the primary care provider for the patient, a referral will be needed.
CIGNA	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using S0190 and misoprostol using S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. A referral is needed if a patient obtains Mifepristone from a family practitioner who is not her PCP.
Great-West/One Health Plan	Mifepristone is covered to the same extent as surgical abortions.	Office visits are reimbursed using regular E&M codes. Providers should use S0190 for Mifepristone and S0191 for misoprostol.	Family practitioners are covered. A referral is needed if the family practitioner is not the patient's primary care physician.
John Deere Health	Mifepristone is covered to the same extent as surgical abortion.	Mifepristone should be submitted using code S0190 and misoprostol using code S0191. Regular E&M codes should be used for office visits.	Family practitioners are covered. If a patient obtains Mifepristone from a family practitioner who is not her PCP, a referral is needed if the doctor is out of network. If the doctor is in-network, a referral is needed if the patient is in the Select Plan. If the patient is in the Choice Plan, and the doctor is in-network, no referral is needed.
Optimum Choice	Mifepristone is covered to the same extent as surgical abortion.	Office visits are covered using regular E&M codes. Providers should use S0190 to be reimbursed for Mifepristone and S0191 to be reimbursed for misoprostol.	Ob/gyns and family practitioners are covered. However, if the family practitioner is not the patient's primary care physician, there is no coverage.