Paragard®
Reimbursement Guide

Your guide for coding, billing, and reimbursement.

Paragard® T380A
intrauterine copper contraceptive

Paragard
Access Center®

General IUS Coding Information

Documenting Paragard IUS placement and subsequent care with appropriate Coding is a key part of the billing process. The CPT and HCPCS/J-Codes below may be used when filing claims. Be sure to check with your patient's individual insurance carrier, as payers vary in their claim reporting requirements.

HCPCS/ J-Code	**J7300**[1]	Intrauterine Copper Contraceptive
CPT Code	**58300**[1]	Insertion of Intrauterine device
CPT Code	**58301**[2]	Removal of Intrauterine device

CPT procedure Codes do not include the cost of Paragard. Use the Healthcare Common Procedure Coding System (HCPCS)/J-Code, J7300, to report use of a unit.[1]

ICD-10-CM Coding

Most IUS services will be linked to a diagnosis Code from the Z30.01 (encounter for initial prescription of contraceptives) and Z30.43 (encounter for surveillance of intrauterine contraceptive device) series.

Z30.014[2]	Encounter for initial prescription of intrauterine contraceptive device. This code includes the initial prescription of the IUD, counseling, and advice, but excludes the IUD insertion
Z30.430[2]	Encounter for insertion of intrauterine contraceptive device
Z30.431[2]	Encounter for routine checking of intrauterine contraceptive device
Z30.432[2]	Encounter for removal of intrauterine contraceptive device
Z30.433[2]	Encounter for removal and reinsertion of intrauterine contraceptive device

Modifiers

Adding modifiers to CPT Codes may be needed in some circumstances.

58300 **-25**[3] Significant, Separately Identifiable E/M by Same Physician or QHCP on Same Day as Other Procedure or Service (e.g. General contraceptive options counseling with same day LARC insertion). Same Day IUD Removal and Reinsertion. The following chart shows coding when an IUD is removed and a new one inserted during an office visit. When appropriate and supported by documentation, two CPT procedure codes, an E/M code, and a HCPCS supply code are reported for the one visit.

58300 **-51**[3] Multiple Procedures performed on the same day, during the same session. Possible clinical scenarios include:

- Removal of IUD and insertion of new IUD on the same day
- Removal of implant and insertion of IUD on the same day

58300 **-52**[3] Reduced Service (Note: incomplete procedure due to anatomical factors (e.g. stenosis).

58300 **-53**[3] Discontinued Service (Note: incomplete procedure due to concerns for patient's well-being (e.g. severe pain/perforation).

CPT PROCEDURES AND SERVICES	MODIFIER	DIAGNOSIS(ES)
58301[2] Removal of Intrauterine device		**Z30.433**[2] Encounter for removal and reinsertion of intrauterine contraceptive device
58300[1] Insertion of Intrauterine device	**51**	
992XX[1] E/M based either on the key components or time spent counseling	**25**	

Important Reminder

Verify the Patient's Benefits.

Before scheduling a Paragard insertion procedure, check coverage for both the product and the insertion procedure. Office personnel may verify a patient's coverage by contacting the patient's health insurance company directly via the health plan portal or the phone number that can be found on the back of the patient's insurance card.

The information in this guide is for informational purposes and does not guarantee payment or coverage. Offices should research coding, coverage, and payment for individual patients prior to initiating treatment since policies and guidelines vary by payer and health plan. Offices are responsible for submitting accurate, complete, and appropriate claims to payers and for compliance with any obligations required by law, contract, or otherwise.

References:

[1] Sutton, K. (2016, March 24). The Essential Guide to LARC Coding. (T. A. Gynecologists, Ed.) Retrieved April 1, 2021, from https://www.acog.org/education-and-events/publications/larc-quick-coding-guide/em-services-code-and-procedure-code

[2] The American College of Obstetricians and Gynecologists. (2021, March 9). LARC Quick Coding Guide. Washington DC. Retrieved April 1, 2021, from https://www.acog.org/-/media/project/acog/acogorg/files/pdfs/publications/larc-coding-guide.pdf

[3] Contraceptive Action Plan. (2018, October). Common Billing Codes: LARC Management. Retrieved April 1, 2021, from https://contraceptiveactionplan.org/index.php/tools-and-resources-menu-item/billing-codes-for-contraceptive-care

Abbreviations:

CPT: Current Procedural Terminology
E/M: Evaluation and Management Service Code
HCPCS: Healthcare Common Procedure Coding System
ICD10: International Classification Of Diseases, Tenth Revision, Clinical Modification
IUS: Intrauterine system (also known as IUD: Intrauterine device)
J-Code: Codes for non-orally administered medication and chemotherapy drugs
LARC: Long-Acting Reversible Contraception
QHCP: Qualified Health Care Professional

Paragard® T380A

intrauterine copper contraceptive

1 UNIT

℞ ONLY

CooperSurgical, Inc.
95 Corporate Drive
Trumbull, CT 06611 USA

NDC 59365-5128-01

Each unit wound with approximately 176 mg of copper wire. In addition, a single copper sleeve is swaged on each of the two transverse arms. Each sleeve contains approximately 68.7 mg of copper. The total surface area of copper on the device is 380 ± 23mm^2. **IMPORTANT:** To be inserted in the uterus only by a licensed clinician or under the supervision of a physician. See detailed instructions for use. **NOTE:** A Patient Package Insert is provided with each unit. Please ensure that this package insert is provided to the patient. Review patient brochure with each patient before insertion. Store at controlled room temperature: 59° to 86°F (15° to 30°C). **CooperSurgical, Inc., 95 Corporate Drive, Trumbull, CT 06611 USA • Made in the USA**

CMS-1500 Form Instructions

19 Remarks/Comments Field

- Include supplemental information for the specific Paragard IUD, to help the payer identify the therapy

Supplemental information for Paragard to help the payer identify the therapy, including product name and NDC: Paragard T380A (intrauterine copper contraceptive), NDC 59365512801. The Paragard NDC number is located on the bottom left of the packaging – see image above.

21 Diagnosis Code(s)

- List the appropriate ICD-10-CM diagnoses code(s) based on the patient's condition

Shaded Area above Box 24A: NDC and Qualifier

- List the 11-digit NDC
- Check if the payer requires a specific qualifier. Contact the payer for more information

23 Prior Authorization Number

- Include the prior authorization number provided by the payer, if required

24A Date(s) of Service

- List the date(s) when the service(s) occurred

24B Place of Service

- Enter "11" for services provided in the office

24D Procedures, Services or Supplies

- Enter the appropriate HCPCS/J-Code on line 1 and the appropriate CPT code for the procedure on line 2
- List any modifiers, if needed, in the appropriate modifier section

24E Diagnosis Pointer

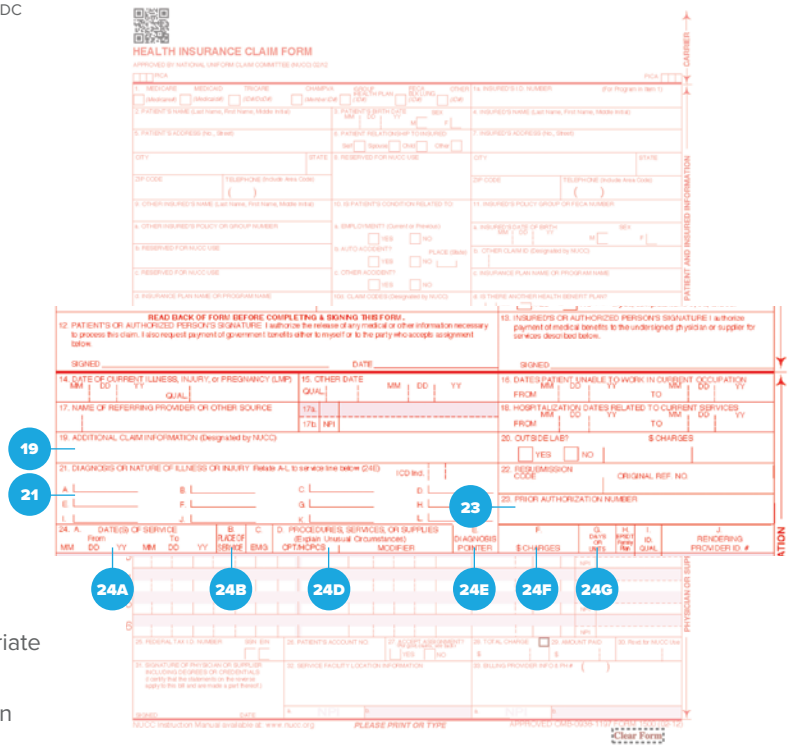
- Enter the letter from Box 21 corresponding to the primary diagnosis of each HCPCS/J-Code or CPT code listed in Box 24D

24F Charges

- Enter the total charge assigned to each service or procedure listed in 24D

24G Days or Units

- Enter the number of units of service for each code listed in 24D. Typically, this will be 1. Check with payer or call 1-877-PARAGARD for more information



This Sample claim form is provided for your guidance only.

Paragard® IUS Replacement Policy

CooperSurgical, Inc. will, in its sole discretion and judgment, consider all justifiable requests for replacement of a Paragard® T380A (intrauterine copper contraceptive). CooperSurgical will replace merchandise providing the conditions stated below are met. Other than for shipping or ordering errors, CooperSurgical does not offer credit or refunds for returned product. All sales are final.

Non-returnable Product

CooperSurgical reserves the right to exchange or destroy any returned merchandise, which, in its judgment, is not returnable for replacement or credit. Merchandise is considered to be non-returnable for replacement or credit for reasons including, but not limited to: the return of merchandise is unauthorized; the merchandise was subjected to improper storage conditions or intended to reduce inventory; the merchandise was damaged by fire, smoke, heat, or water resulting from a casualty occurrence or insurable hazard, or any other reason that CooperSurgical determines, in its sole discretion.

I. Replacement Associated with Adverse Event

A Paragard unit may be considered for replacement when associated with an adverse event within 90 days of placement. To request a replacement associated with an adverse event:

1. Immediately following event, contact CooperSurgical by calling 1-877-PARAGARD. Please have the patient's medical record and the lot number of the unit readily available.
2. Provide information required by the U.S. Food and Drug Administration (FDA) pertaining to an Adverse Drug Event (ADE).
3. Upon receipt of all required information, you will be provided with a Product Replacement Form inclusive of a unique case number.
4. The request will be processed and the replacement Paragard unit will be shipped within 1 business day.

II. Replacement Associated with Product Quality Issue

A Paragard unit may be considered for replacement if there is a suspected product quality issue, which includes a physical or mechanical defect in the product, its packaging, or labeling. To request a replacement with a product quality issue:

1. Immediately following event, contact CooperSurgical by calling 1-877-PARAGARD. Please have the patient's medical record and the lot number of the unit readily available.
2. Provide the lot number of the unit, and descriptive information pertaining to the event. You will be provided with a pre-paid mailer to return the original Paragard unit to the following address:

   CooperSurgical, Inc.
   825 Wurlitzer Drive
   North Tonawanda, NY 14120
3. Upon receipt of all required information, you will be provided with a Product Replacement Form inclusive of a unique case number.
4. The request will be processed and the replacement Paragard unit will be shipped within 1 business day.

III. Replacement for Dropped / Contaminated Unit

A Paragard unit may be considered for replacement if the unwrapped unit has been dropped or otherwise inadvertently contaminated. To request a replacement for a dropped or contaminated unit:

1. Within 1 week of the event, contact CooperSurgical by calling 1-877-PARAGARD.
2. Provide the lot number of the unit, and descriptive information pertaining to the event.
3. Upon receipt of all required information, you will be provided with a Product Replacement Form inclusive of a unique case number and return shipping instructions.
4. The request will be processed and the replacement Paragard unit will be shipped within 1 business day.
5. Within 30 days of receipt of the Product Replacement Form, please return the dropped or contaminated unit in the original Tyvek pouch and package to the following address:

   CooperSurgical, Inc.
   Attention: Replacement Department
   825 Wurlitzer Drive
   North Tonawanda, NY 14120

IV. Shipping or Ordering Errors

A Paragard unit is not eligible for return or refund unless a shipping or ordering error has occurred. All sales are final. To rectify a shipping or ordering error:

1. Report the issue within 48 hours of receipt of the product by calling 1-877-PARAGARD.
2. If CooperSurgical determines that a shipping or ordering error occurred at the fault of Paragard Direct℠, a refund, replacement, or credit to your account will be issued.

If you obtained a Paragard unit through one of our specialty pharmacies, please contact them directly for assistance obtaining a replacement unit in accordance with the policy outlined above.

For Paragard full Prescribing Information, visit Paragard.com or call 1-877-PARAGARD.

CooperSurgical®