

KENTUCKY FAMILY PLANNING PROGRAM

Approved Agency CPT Codes

Effective July 1, 2022

CPT Code	Description of Services	Technical Component	Professional Component	Reimbursement Rate
00851	Anesthesia for Tubal Ligation (Base Unit value: 6)*			\$127.68
00921	Anesthesia for Vasectomy (Base Unit value: 3)**			\$63.84
11981	Insert Drug implant Device			\$126.87
11982	Remove Drug Implant Device			\$144.17
11983	Remove/ Insertion Drug Implant			\$204.52
36415	Routine Venipuncture			\$3.00
36416	Capillary Blood Specimen			\$3.27
55250	Vasectomy			\$171.54
57170	Fitting of Diaphragm/ Cap			\$58.07
57800	Dilation of cervical canal			\$37.90
58300	Insertion of IUD			\$68.89
58301	Removal of IUD			\$90.68
58670	Bilateral Tubal Ligation - Fulguration			\$280.12
58671	Bilateral Tubal Ligation - Band			\$287.90
76857	Limited Pelvic Ultrasound	\$28.52	\$16.44	\$44.96
80061	Lipid Panel			\$16.31
81002	Urinalysis Nonauto W/O Scope (Dipstick)			\$3.45
81025	Urine Pregnancy test			\$1.72
82120	Amines Vaginal Fluid Qual			\$5.39
83986	Assay PH Body Fluid NOS			\$5.13
85018	Hemoglobin			\$3.05
85025	Complete CBC w/auto diff			\$11.14
86592	Syphilis Test Non-Trep Qual			\$6.11
86780	Treponema Pallidum Antibody			\$9.04
86803	Hep C Antibody Test			\$19.42
87210	Smear Wet Mount Saline/Ink			\$5.15
87389	HIV (antibody confirmative test)			\$29.73
87491	Chlamydia Trach DNA AMP Probe			\$50.27
87591	N. Gonorrhoeae DNA Dir Prob			\$50.27
88141	Conventional Pap test, cervical or vaginal, any reporting system, requiring interpretation by physician			\$29.62
88142	Liquid-based Pap test (Thin Prep)			\$29.02
88164	Conventional Pap test			\$15.13
88175	Cytopath C/V Autofluid Redo, Pap Test (effective 5/1/2021)			\$26.21

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96372	Therapeutic, Prophylactic or Diagnostic injection			\$22.61
U0001	2019 – NCOV Diagnostic P			\$35.91
U0002	SARS-COV-2, For Non-CDC			\$51.31
New Patient Visit				
99202	Expanded			\$68.99
9920295	Expand Telemedicine w video			\$68.99
99203	Detailed			\$100.39
9920395	Detailed Telemedicine w video			\$100.39
99204	Comprehensive			\$155.31
9920495	Comprehensive Telemedicine w video			\$155.31
99205	Complex			\$194.18
9920595	Complex Telemedicine w video			\$194.18
99383	Preventive health check(5-11 yrs)			\$95.58
99384	Preventive health check (12-17 yrs)			\$104.23
99385	Preventive health check (18-39 yrs)			\$104.23
99386	Preventive health check(40-64 yrs)			\$121.18
99393	Preventive health check (5-11 yrs)			\$83.67
Established Patient Visit				
CPT Code	Description of Services	Technical Component	Professional Component	Reimbursement Rate
98970	Non Physician Healthcare Provider Online Digital E/M Service 5-10 minutes			\$12.00
98971	Non Physician Healthcare Provider Online Digital E/M Service 11-20 minutes			\$24.00
98972	Non Physician Healthcare Provider Online Digital E/M Service 21+ minutes			\$38.56
99211	Level 1			\$18.28
9921195	Level 1 Telemedicine w video			\$18.28
99212	Level 2			\$40.17
9921295	Level 2 Telemedicine w video			\$40.17
99213	Level 3			\$67.93
9921395	Level 3 Telemedicine w video			\$67.93
99214	Level 4			\$100.55
9921495	Level 4 Telemedicine w video			\$100.55
99215	Level 5			\$135.11
9921595	Level 5 Telemedicine w video			\$135.11
99394	Preventive health check(12-17 yrs)			\$91.97

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CPT Code	Description of Services	Technical Component	Professional Component	Reimbursement Rate
99395	Preventive health check (18-39 yrs)			\$91.97
99396	Preventive health check (40-64 yrs)			\$100.63
Telephone visits without video				
Not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment.				
99441	Telephone evaluation & management 5-10 minutes			\$11.05
99442	Telephone evaluation & management 11-20 minutes			\$21.57
99443	Telephone evaluation & management 21-30 minutes			\$31.84
Contraceptive Methods				
A4261	Cervical Cap			\$65.00
A4266	Diaphragm			\$22.00
A4267	Male Condoms			\$0.25
A4268	Female Condom			\$0.25
G0378	Hospital Pre/Post Op			\$1000.00
A4269	Spermicide (cream, film, foam, gel, sponge, suppository)			\$5.00
J1050	Medroxyprogesterone Acetate (Depo)			\$47.12
J7294	Segesterone Acet & Eth Estradiol Yearly (effective 7/1/22)			\$339.96
J7295	Ethinyl Estradiol & Etonogestrol Monthly (effective 7/1/22)			\$28.33
J7296	Levonorgestrel Releasing IU 19.5 MG Kyleena (effective 2/1/22)			\$1,049.24
J7297	Levonorgestrel Releasing IU 52 MG Liletta			\$656.25
J7298	Levonorgestrel Releasing IU 52 MG Mirena (effective 2/1/22)			\$1,049.24
J7300	IUD/Copper (ParaGard) (effective 7/1/21)			\$937.00
J7301	Levonorgestrel IU 19.5 MG Skyla (effective 2/1/22)			\$873.67
J7303	Contraceptive Vaginal Ring - each			\$26.33
J7304	Contraceptive Hormone Patch all			\$7.64
J7306	Levonorgesterel Contraceptive Implant Sys. (effective 7/1/22)			\$1,049.24
J7307	Nexplanon (effective 9/1/21)			\$1030.64
Q0111	Wet Mount (PPM Lab Site)			\$5.02
Q0112	Potassium Hydroxide Preps			\$5.96
S4993	Contraceptive Pill for BC			\$4.64

*All rates are determined using the Medicaid Preventive Rate Schedule or the Medicaid Physician's Rate Schedule.