



Contraceptive Methods and Counseling

In August 2011, the U.S. Department of Health and Human Services (HHS) announced new guidelines to ensure women receive services for certain contraceptive methods and counseling at no additional cost to the member. The guidelines refer to Federal Drug Administration (FDA)-approved contraceptive methods for all women with reproductive capacity as prescribed.

In compliance with these guidelines, Blue Cross and Blue Shield of Nebraska (BCBSNE) covers certain contraceptive methods and counseling at 100% when members use a BCBSNE in-network provider.

This information has been updated and is effective on plan years beginning on or after August 1, 2015. To confirm when this information is effective on your plan please call our Member Services Department at the number shown on the back of your BCBSNE member ID card.

What is covered at 100%?

Not all contraceptive methods and counseling are covered under your plan. Certain criteria must be met for services to be covered under your plan at no cost to you.

If your plan covers contraceptive services and supplies, only FDA-approved contraceptive services and supplies are covered. This does include some over-the-counter (OTC) contraceptive methods. It does not include educational brochures. Some covered services will be at no cost to you and some services will remain covered subject to a cost share (typically your plan's deductible and coinsurance).

Contraceptive methods for females are covered at 100% when the services are provided by an in-network provider. If the services are provided by an out-of-network provider, benefits are subject to your cost share amount, not to exceed the maximum allowable amount. Services for male contraceptive methods, such as vasectomies, are paid based on your plan's benefits and are subject to a cost share amount.



What is covered under the medical portion of my plan and what is covered under the pharmacy portion of my plan?

Certain contraceptive services are covered under the medical portion of your plan and some contraceptive services are only covered under the pharmacy portion of your plan.

Under the **medical** portion of your plan, services that will be covered at no cost share to you include the following services when billed with a contraceptive diagnosis:

- Physician visits and follow up care
- Counseling for natural family planning services
- Diaphragms and cervical caps (device and fitting)
- Implants, such as Implanon® (drugs, insertion and removal)
- Injections, such as depo-provera (drug and administration)
- Intrauterine device (device, insertion and removal)
- Tubal ligation (surgical procedure and related services when performed as the primary procedure)

For procedures that require insertion and removal, your plan will only cover the procedure at no cost to you when the removal and reinsertion is performed on the same day in the same session.

Some contraceptive services may be received in a doctor's office, and some services and supplies may be obtained from a pharmacy. Your doctor will bill for contraceptive services performed in his/her office. Other contraceptive services are paid when you visit an Rx Nebraska in-network pharmacy and present your BCBSNE ID card. See the chart below to learn what is covered under your medical plan (services received in a doctor's office) and what is covered under your prescription drug plan (services obtained from a pharmacy):

Medical	Pharmacy*
IUDs	Birth control pills
Diaphragms	Patches
Cervical caps	Rings
Injectable contraceptive drugs	Female condoms
Implantable contraceptive drugs	Spermicide
Elective sterilization	Sponges

* In order to be covered at no cost to you the contraceptive item must be listed on the BCBSNE Drug List called Contraceptive Drugs and Methods Pharmacy List. If the item is not on the list, the item will be covered, but will be subject to your plan's normal generic or non-formulary brand cost share amounts (applicable copayment, deductible and/or coinsurance). See the below chart for cost share amounts.

Covered Contraceptive Drugs	Benefits
Formulary <ul style="list-style-type: none"> • generic drug • brand name drug 	Plan Pays 100% Plan Pays 100%
Non-formulary <ul style="list-style-type: none"> • generic drug • brand name drug 	Same as any other generic Same as any other non-formulary brand drug
Your plan's standard day supply limits apply.	

NOTE: You will need a prescription for OTC items. For claims to be processed as in-network at no additional cost to you, OTC items must be purchased at the pharmacy counter instead of the upfront cashier.

These guidelines/benefits may not apply to certain religious employer groups. If you are not sure if your plan covers contraceptive methods and counseling for women, call our Member Services Department at the number on the back of your BCBSNE ID card.