

# ICD-10 Quick Reference Guide - Contraceptive Management

## 1. Birth Control Coverage is Mandated Under the Affordable Care Act (ACA)

- The ACA mandates that most private health plans must cover all US Food and Drug Administration (FDA)-approved classes of contraceptive methods<sup>1</sup>
- Plans are required to cover, without cost-sharing, at least one form of contraception in each method of contraception identified by the FDA<sup>2,3</sup>
- If an individual's attending provider recommends a particular service or FDA-approved item based on a determination of medical necessity with respect to that individual, the plan or issuer must cover that service or item without cost sharing<sup>4</sup>

## 2. When a Letter of Medical Necessity is Required to Ensure Coverage for ANNOVERA® (segesterone acetate and ethinyl estradiol vaginal system)

- Access sample Letter of Medical Necessity at [www.annoverahcp.com/savings-support](http://www.annoverahcp.com/savings-support)
- Include complete patient information and **correct ICD-10** diagnosis code to support and streamline patient access

### ICD-10-CM Diagnosis Code Z30 - Encounter for Contraceptive Management

#### CODE

#### ENCOUNTER

Listing of Codes/Encounters for contraceptive management is not comprehensive. There are numerous resources available to access and search ICD-10 information.

Z30.0

General counseling and advice on contraception

Z30.01

Initial prescription of contraceptives

Z30.015

Initial prescription of vaginal ring hormonal contraceptive

Z30.018

Initial prescription of other contraceptives

Z30.09

Other general counseling and advice on contraception

Z30.8

Other contraceptive management

Z30.9

Contraceptive management, unspecified

Include **Summary of Patient's Diagnosis** where indicated on the Letter of Medical Necessity. **This information must be included in addition to the Diagnosis Code.**

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Please see Important Safety Information, including **BOXED WARNING**, on the next page and Full Prescribing Information at [ANNOVERA.com/pi.pdf](http://ANNOVERA.com/pi.pdf)

## IMPORTANT SAFETY INFORMATION

### WARNING: CIGARETTE SMOKING AND SERIOUS CARDIOVASCULAR EVENTS See full prescribing information for complete boxed warning.

- Females over 35 years old who smoke should not use ANNOVERA.
- Cigarette smoking increases the risk of serious cardiovascular events from combination hormonal contraceptive use.

## CONTRAINDICATIONS

ANNOVERA is contraindicated and should not be used in women with a high risk of arterial or venous thrombotic diseases; current or history of breast cancer or other estrogen- or progestin-sensitive cancer; liver tumors, acute hepatitis, or severe (decompensated) cirrhosis; undiagnosed abnormal uterine bleeding; hypersensitivity to any of the components of ANNOVERA; and use of Hepatitis C drug combinations containing ombitasvir/paritaprevir/ritonavir, with or without dasabuvir.

## WARNINGS AND PRECAUTIONS

- Stop ANNOVERA if a thrombotic or thromboembolic event occurs, and at least 4 weeks before and through 2 weeks after major surgery. Start ANNOVERA no earlier than 4 weeks after delivery, in females who are not breastfeeding. Consider cardiovascular risk factors before initiating in all females, particularly those over 35 years.
- Discontinue if jaundice occurs.
- Stop ANNOVERA prior to starting therapy with the combination drug regimen ombitasvir/paritaprevir/ritonavir. ANNOVERA can be restarted 2 weeks following completion of this regimen.
- Do not prescribe ANNOVERA for females with uncontrolled hypertension or hypertension with vascular disease. Monitor blood pressure and stop use if blood pressure rises significantly in females with well-controlled hypertension.
- Monitor glucose in pre-diabetic or diabetic females taking ANNOVERA. Consider an alternate contraceptive method for females with uncontrolled dyslipidemias.
- Patients using ANNOVERA who have a significant change in headaches or irregular bleeding or amenorrhea should be evaluated. ANNOVERA should be discontinued if indicated.
- Other warnings include: gallbladder disease; depression; cervical cancer; increased serum

concentrations of binding globulins; hereditary angioedema; chloasma (females who tend to develop chloasma should avoid exposure to the sun or UV radiation while using ANNOVERA); toxic shock syndrome (TSS) (if a patient exhibits symptoms of TSS, remove ANNOVERA, and initiate appropriate medical treatment); vaginal use (ANNOVERA may not be suitable for females with conditions that make the vagina more susceptible to vaginal irritation or ulceration).

## ADVERSE REACTIONS

The most common adverse reactions reported in at least 5% of women who received ANNOVERA were: headache/migraine, nausea/vomiting, vulvovaginal mycotic infection/candidiasis, lower/upper abdominal pain, dysmenorrhea, vaginal discharge, urinary tract infection, breast pain/tenderness/discomfort, bleeding irregularities including metrorrhagia, diarrhea, and genital pruritus.

## DRUG INTERACTIONS

Drugs or herbal products that induce certain enzymes, including CYP3A4, may decrease the effectiveness of ANNOVERA or increase breakthrough bleeding. Counsel patients to use a back-up or alternative method of contraception when enzyme inducers are used with ANNOVERA.

## INDICATION

ANNOVERA is a progestin/estrogen combination hormonal contraceptive indicated for use by females of reproductive potential to prevent pregnancy.

Limitations of Use: ANNOVERA has not been adequately studied in females with a body mass index >29 kg/m<sup>2</sup>.

Please note this information is not comprehensive. Please see Full Prescribing Information, including **BOXED WARNING**, at [ANNOVERA.com/pi.pdf](https://www.annovera.com/pi.pdf)

**References:** 1. Data point: The Affordable Care Act is improving access to preventive services for millions of Americans. ASPE.HHS.gov website. <https://aspe.hhs.gov/pdf-report/affordable-care-act-improving-access-preventive-services-millions-americans>. Published May 14, 2015. Accessed December 17, 2019. 2. Women's preventive services guidelines. HRSA website. <https://www.hrsa.gov/womens-guidelines/index.html>. Updated September 2018. Accessed December 17, 2019. 3. Health benefits & coverage: birth control benefits. Healthcare.gov website. <https://www.healthcare.gov/coverage/birth-control-benefits/>. Accessed December 17, 2019. 4. FAQs about Affordable Care Act implementation. Centers for Medicare and Medicaid Services website. [https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/Downloads/aca\\_implementation\\_faqs26.pdf](https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/Downloads/aca_implementation_faqs26.pdf). Published May 11, 2015. Accessed December 17, 2019.

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