Somerset

3290 W. Big Beaver Rd. Suite 444 Troy, MI. 48084-2914

Gynecology & Obstetrics Phone 248-816-9200 Fax 248-816-1017 www.somersetgynob.com

Contraception Insurance Information

LONG-ACTING REVERSIBLE CONTRACEPTION (LARC):

The IUD device or Nexplanon implant may or may not be covered by your insurance, so we strongly encourage you to *verify your contraceptive benefits. If it is not a covered benefit, payment in full is expected at the time of service. If it is a *reviewable benefit we will bill your insurance and request a copy of your credit card, to be kept on file for any unpaid balances.

Insurance coverage depends on many variables, including but not limited to: coverage on date of service, group's contract (which can change during annual re-enrollment), benefits, deductibles, copays, waiting periods, etc. Please verify your individual coverage. Your insurance company will need the procedure and diagnosis codes listed below to determine *coverage.

MIRENA IUD DEVICE: Procedure code J7298 Cost to patient: \$850.00 Diagnosis code Z30.430 Go to www.mirena-us.com for payment plan information.

LILETTA IUD DEVICE: Procedure code J7297 Cost to patient: **\$650.00** Diagnosis code **Z30.430** Go to www.liletta.com for Patient Assistance information.

PARAGARD IUD DEVICE: Procedure code J7300 Cost to patient: **\$750.00** Diagnosis code Z30.430

Go to www.paragard.com for Patient Assistance Program information.

SKYLA IUD DEVICE: Procedure code J7301 Diagnosis code Z30.430 Cost to patient: **\$700.00**

IUD INSERTION: Procedure code 58300 Diagnosis code Z30.430 Cost to patient: \$100.00

NEXPLANON Implant **DEVICE**: Procedure code **J7307** Cost to patient: **\$800.00** Diagnosis code Z30.49

NEXPLANON **INSERTION**: Procedure code 11981 Cost to patient: **\$210.00** Diagnosis code Z30.49

Visit <u>www.nexplanon -usa.com</u> for any purchasing options available.

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^{*}Benefit information is never a guarantee of coverage; codes and prices are subject to change.

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Contraception Insurance Information Con't.

PERMANENT CONTRACEPTION**:

- Essure procedure: Approximate charge: \$3300 Procedure code: 58565 Diagnosis code Z30.2
- Tubal at cesarean delivery: Approximate charge: \$400 Procedure code: 58611 Diagnosis code Z30.2
- Tubal at vaginal delivery: Approximate charge: \$600 Procedure code: 58605 Diagnosis code Z30.2
- Laparoscopic Tubal ligation NOT after delivery: Approximate charge: \$650 Procedure code: 58670 Diagnosis code: Z30.2
 - Abdominal Tubal ligation NOT after delivery: Approximate charge: \$700 Procedure code: 58600 Diagnosis code: Z30.2

^{*}Benefit information is never a guarantee of coverage; codes and prices are subject to change.

^{**}Hospital charges for procedures can be obtained by calling Beaumont Health at 855-577-5780 or at www.beaumont.org/patients-visitors/billing/pricing