IntraUterine Device (IUD)/Implant Insurance Worksheet

If you are active on the UNC Student Blue Insurance, the Graduate Student Health Insurance or the PostDoc Insurance Plan, all charges at Campus Health Services for these procedures will be paid at 100% and it is not necessary to complete this worksheet.

If Campus Health Services is in-network with your insurance plan (BCBS, CIGNA, United Health Care, NC Medicaid, Tricare Standard and Tricare Reserve) you should call your insurance company using the phone number on the back of your card to check your benefits. Patients covered by Tricare Prime are encouraged to see their primary care provider.

If Campus Health Services is out-of-network with your insurance plan it may be beneficial to be referred to an in-network provider.

- View the educational video, “Get It and Forget it” about IUD at https://www.youtube.com/watch?v=U3xQ0M685Y&feature=youtu.be
- Call your insurance company to verify benefits for all devices listed below.

Your insurance company may ask for Campus Health Services Identification Number:
- NPI 1356368708 (for non-student insurance companies)

Here are some questions you should ask your insurance representative:
- Will my insurance pay for the IUD/Insertion or Implant/Insertion at Campus Health?  
- Is Campus Health Services In-Network with my insurance?  Y/N
- What is my deductible? $________
- Have I met my deductible? Y/N  If not, what portion remains? $__________
- What is my financial responsibility for the procedure? $____________
- Ask for a call reference number #________________________
  Customer Service Representative Name: ___________________________  Date: __________________

If you have any questions about completing this form, email insurancerep@unc.edu or call 919-966-6588.

You will need the below information when you contact your insurance company to verify IUD/Hormone Implant benefits. This information will be needed in the decision-making process between you and your provider.

### IUD

<table>
<thead>
<tr>
<th>Device CPT Code</th>
<th>Device</th>
<th>J7302</th>
<th>Yes</th>
<th>No</th>
<th>(ask if covered for insertion at CHS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mirena</td>
<td>J7302</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td>(ask if covered for insertion at CHS)</td>
</tr>
<tr>
<td>Paragard</td>
<td>J7300</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td>(ask if covered for insertion at CHS)</td>
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<tr>
<td>Skyla</td>
<td>J7301</td>
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<table>
<thead>
<tr>
<th>IUD Insertion Code</th>
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<th>No</th>
<th>(ask if covered for insertion at CHS)</th>
</tr>
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<td>58300</td>
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<tr>
<td>Z30.430</td>
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</table>

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
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<tbody>
<tr>
<td>Z30.49</td>
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### Hormone Implant

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<th>Device CPT Code</th>
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<tbody>
<tr>
<td>Nexplanon</td>
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<td>Yes</td>
<td>No</td>
<td>(ask if covered for insertion at CHS)</td>
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<th>Implant Insertion Code</th>
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<tr>
<td>11981</td>
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<td>(ask if covered for insertion at CHS)</td>
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</table>

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
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<th>No</th>
<th>(ask if covered for insertion at CHS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Z30.49</td>
<td></td>
<td></td>
<td>(ask if covered for insertion at CHS)</td>
</tr>
</tbody>
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Bring this completed worksheet to your IUD/Nexplanon consultation appointment with a Women’s Health provider.

UNC CHS: 8/15
Revised: 10/2015
I-02 IUD and Nexplanon Scheduling