

MEDICAL POLICY STATEMENT KENTUCKY MARKETPLACE PLANS

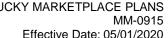
Policy Name		Policy Number	Date Effective		
Abortion		MM-0915	05/01/2020		
Policy Type					
MEDICAL	Administrative	Pharmacy	Reimbursement		

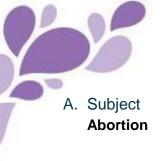
Medical Policy Statement prepared by CSMG Co. and its affiliates (including CareSource) are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services include, but are not limited to, those health care services or supplies that are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part, or significant pain and discomfort. These services meet the standards of good medical practice in the local area, are the lowest cost alternative, and are not provided mainly for the convenience of the member or provider. Medically necessary services also include those services defined in any Evidence of Coverage documents, Medical Policy Statements, Provider Manuals, Member Handbooks, and/or other policies and procedures.

Medical Policy Statements prepared by CSMG Co. and its affiliates (including CareSource) do not ensure an authorization or payment of services. Please refer to the plan contract (often referred to as the Evidence of Coverage) for the service(s) referenced in the Medical Policy Statement. If there is a conflict between the Medical Policy Statement and the plan contract (i.e., Evidence of Coverage) will be the controlling document used to make the determination.

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B. Background

Abortion is not a covered benefit except for the exemptions listed within this policy.

C. Definitions

- Abortion The use of any means whatsoever to terminate the pregnancy of a woman known to be pregnant with intent to cause fetal death.
- Consent As used in KRS 311.710 to 311.820 with reference to those who must give their consent, means an informed consent expressed by a written agreement to submit to an abortion on a written form of consent to be promulgated by the secretary for health and family services.
- **Medical emergency** Any condition which, on the basis of the physician's good-faith clinical judgment, so complicates the medical condition of a pregnant female as to necessitate the immediate abortion of her pregnancy to avert her death or for which a delay will create serious risk of substantial and irreversible impairment of a major bodily function.
- Medical necessity A medical condition of a pregnant woman that, in the reasonable judgment of the physician who is attending the woman, so complicates the pregnancy that it necessitates the immediate performance or inducement of an abortion.
- Individual, private setting Conditions under which informed consent must be given for a medical procedure, meeting must be face-to-face with the member and physician/designee physically located in the same room or participating in real-time visual telehealth services.
- Probable gestational age of the embryo or fetus The gestational age that, in the judgment of a physician, is, with reasonable probability, the gestational age of the embryo or fetus at the time that the abortion is planned to be performed.
- Fetus A human being from fertilization until birth.
- Minor Any person under the age of eighteen.
- Emancipated minor Any minor who is or has been married or has by court order or otherwise been freed from the care, custody, and control of her parents.

D. Policy

This policy is written to conform to Kentucky Statute.

- I. Abortion is not a covered benefit except when necessary for the preservation of life of the pregnant woman.
- II. Prior authorization (PA) is required.
 - A. Medical documentation provided supports that the abortion is to preserve the life of the pregnant woman.
 - B. Evidence of informed consent is included in the PA (not applicable in a medical emergency or medical necessity):



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- 1. Prior to the informed consent, the physician or qualified technician:
 - a. Performs an obstetric ultrasound;
 - b. Provides an explanation of what the ultrasound depicts;
 - c. Displays the ultrasound images for the pregnant woman to view them;
 - d. Auscultates the heartbeat so the pregnant woman may hear it; and
 - e. Provides a medical description of the ultrasound.
- 2. A written statement that the pregnant woman was presented with the information in II.B.1. has viewed the ultrasound and has listened to the heartbeat or declined to do so.
- C. Evidence of informed consent must be included in the PA (not applicable in a medical emergency or medical necessity):
 - 1. At least 24 hours prior to the abortion, physician/delegate has verbally informed the pregnant woman of all of the following:
 - a. Nature and purpose or procedure and medical risks and alternatives to the procedure;
 - b. Probable gestational age of the embryo or fetus at the time of the abortion:
 - c. Medical risks of the pregnant woman carrying the pregnancy to term; and
 - d. Potential ability of physician to reverse the effects of prescription drugs intended to induce abortion and contact information of a physician who may aide in reversal.
 - 2. At least 24 hours prior to the abortion, physician/delegate has informed the pregnant woman that:
 - a. Member has a right to review printed materials free of charge;
 - b. Medical assistance benefits may be available for prenatal care, childbirth, and neonatal care; and
 - c. The father of the fetus is liable to assist with support of child.
 - 3. A written statement that the pregnant woman has received the information in II. C. and that the consent is voluntary, knowingly, and member is not under influence of any drug of abuse or alcohol.
- III. Abortions are not performed on a minor unless:
 - A. Physician/designee obtain the informed written consent of the minor and one parent or legal guardian;
 - B. The minor is emancipated and physician/designee has the informed written consent; or
 - C. The minor petitions the court and obtains order to grant the abortion.
- IV. Use of telehealth is not allowed in the performance of an abortion.
- V. Reimbursement is not be made for associated services such as anesthesia, laboratory tests, or hospital services when the abortion service itself is not reimbursed.



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F. Related Polices/Rules

G. Review/Revision History

DATE		ACTION	
Date Issued	01/30/2020	New Policy	
Date Revised			
Date Effective	05/01/2020		
Date Archived	03/01/2021		

H. References

- 1. Kentucky Administrative Regulation. (2017, January 9). Requirement for performance and explanation of obstetric ultrasound and auscultation of fetal heartbeat prior to abortion -- Exception for medical emergency or necessity. Retrieved January 24, 220 from https://apps.legislature.ky.gov
- 2. Kentucky Revised Statute. (2017, June 29). Section 311.720 Definitions for KRS 311.710 to 311.820. Retrieved January 24, 2020 from https://casetext.com
- 3. Kentucky Revised State. (2016, July 14). Section 311.724 Informed consent given in "individual, private setting". Retrieved January 24, 2020 from https://casetext.com
- 4. Kentucky Revised Statute. (2019, June 26). Section 311.725 Requirement of voluntary and informed written consent for abortion Cabinet's duty to produce and make available informational materials Abortions in medical emergencies. Retrieved January 24, 2020 from https://casetext.com
- Kentucky Revised Statute. (2019, July 10). Section 311.728 Physician must be physically present with patient to perform or induce abortion - Use of telehealth prohibited. Retrieved January 24, 2020 from https://casetext.com
- Kentucky Revised Statute. (1982, July15). Section 311.732 Performance of abortion upon a minor - Definitions - Consent requirement - Petition in District or Circuit Court - Medical emergencies. Retrieved January 24, 2020 from https://casetext.com
- 7. Kentucky Revised Statute. (1984, July 13). 304.5-160 Health insurance and health care contracts not to cover elective abortions except by optional rider. Retrieved January 24, 2020 from https://statecodesfiles.justia.com

The Medical Policy Statement detailed above has received due consideration as defined in the Medical Policy Statement Policy and is approved.

