## Pregnancy termination 3 — Elective

We provide coverage for this procedure for adult members who meet medical necessity criteria. Submit authorization requests through the e-referral system.

The submitter will receive a prompt to complete a questionnaire to determine the appropriateness of the requested service. The questions are listed below.

If all questions are answered, e-referral will either approve or pend the case. If the case pends and we cannot authorize it, we will contact the provider for additional clinical information. Authorization is not a guarantee of payment.

Payment is based on established claim edits. We will retrospectively monitor compliance with this authorization requirement.

### Applicable procedure codes:

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### See below for the questions you’ll encounter in the e-referral system.

**Q** Is the patient in the first trimester (through the 13th week) of pregnancy?

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<tr>
<th></th>
<th>Possible answers: ☐ Yes  ☐ No  ☐ N/A</th>
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**Q** Has the patient had an abortion in the past 24 months?

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<tr>
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<th>Possible answers: ☐ Yes  ☐ No</th>
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