Pregnancy termination 4

We provide coverage for this procedure for adult BCN Advantage 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.


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

**Q** Does the patient suffer from a physical disorder, physical injury, or physical illness, including a life-endangering physical condition caused by or arising from the pregnancy itself that would, as certified by the physician, place the woman in danger of death unless an abortion is performed?

**A**

Possible answers: □ Yes □ No □ N/A

**Q** Is the patient’s pregnancy a result of rape or incest?

**A**

Possible answers: □ Yes □ No □ N/A