

# Jurisdiction Specific Medicare Part B Intrauterine Devices (IUD)

## Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name	Dosage Form
Kyleena	levonorgestrel-releasing	intrauterine device
Liletta	levonorgestrel-releasing	intrauterine device
Mirena	levonorgestrel-releasing	intrauterine device
Skyla	levonorgestrel-releasing	intrauterine device

## Covered Uses

The indications below are considered a covered benefit provided that all the approval criteria are met, and the member has no exclusions to the prescribed therapy.

- Chronic abnormal uterine bleeding
- Endometrial Hyperplasia without Atypia

All other indications will be assessed on an individual basis. Submissions for indications other than those listed in this criteria should be accompanied by supporting evidence from Medicare approved compendia.

## Exclusions

The following are exclusions to therapy:

Use for contraception

# Coverage Criteria

## Chronic Abnormal Uterine Bleeding<sup>1</sup>

Authorization of one intrauterine device (IUD) placement may be granted for treatment of chronic abnormal uterine bleeding (AUB) when both of the following criteria are met:

- Member has one of the following conditions:
  - Leiomyomas (fibroids)
  - Malignancy
  - Endometrial hyperplasia
  - Iatrogenic causes of AUB
- Member has experienced irregularities in the menstrual cycle involving frequency, regularity, duration, and volume of flow outside of pregnancy for at least six months.

## Endometrial Hyperplasia without Atypia<sup>1</sup>

Authorization of one IUD placement may be granted for treatment of endometrial hyperplasia without atypia when one of the following criteria is met:

- The member is not a reasonable surgical candidate
- The member wants to preserve fertility

## References

1. Billing and Coding: Treatment of Abnormal Uterine Bleeding with Intrauterine Device (Hormone-Eluting) A59620-Original Version. Available at: <https://www.cms.gov/medicare-coverage-database/indexes/national-and-local-indexes.aspx>. Accessed December 3, 2024.
2. Micromedex Solutions [database online]. Truven Health Analytics, Greenwood Village, CO. Available at: <https://www.micromedexsolutions.com>. Accessed December 3, 2024.