

Benefit Policy: Rape and Sexual Assault

Benefit Intent Policy BI-002
 Effective 07/01/2025 (01/01/2025 CALPERS)
 Revision/Last Review: 07/21/2025



Mandated Benefit Policy Policy Number: 002

Assembly Bill 2843 – Rape and Sexual Assault	
Health and Safety Code Sections: 1317.1, 1367.37, 1367.03	Insurance Code Sections: 10133.54, 10123.211
Original effect date: 7-1-2025	Revision date: 07/21/2025
Exception effective date: 1-1-2025 CalPERS Line of Business (HMO and PPO)	
Self-Funded Groups are not subject to this mandate but may opt in. Verify if the Self-Funded Group Opted In for coverage of this mandate.	

Market Segment (Line of Business)	Medical Plan Types: In-Network Providers	Non-Medical Product Types:
IFP- On & Off Exchange Small Business - CCSB & Off CCSB Large Group	HMO EPO PPO POS PSP	Pharmacy
Regulator:	Funding:	Grandfather Plan Status:
Department of Managed Healthcare (DMHC) California Department of Insurance (CDI)	Fully Insured Flex Funded Self-Funded (only those Groups who have opted in for this mandate)	Grandfathered Plans Non-Grandfathered Plans

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Policy Purpose

Blue Shield of California Rape and Sexual Assault Benefit policy follows the State of California statutory mandated benefits requirements of the Health and Safety Code and Insurance Code provisions referenced above ("State Law"). This Policy documents the coverage requirements that Blue Shield will follow in benefit coding and claims adjudication to meet the requirements of this mandate. Blue Shield will use industry standard codes (CPT, HCPCS, ICD10 DX and Revenue Codes) from Centers for Medicare and Medicaid Services (CMS) and the American Medical Association (AMA) Current Procedural Terminology (CPT) to identify facility, professional, and pharmacy benefit claims that are subject to the coverage and cost share waiver requirements of this mandate. This Policy documents the codes that Blue Shield has identified as being specific to rape or sexual assault, which are listed in the table below. Blue Shield will use these codes to identify claims for which cost sharing will be waived as required by this mandate.

This Policy is also intended to communicate Blue Shield's coding requirements to providers so that, when applicable, they can submit benefit claims with accurate diagnosis codes specific to rape and sexual assault. State Law requires the treating provider to submit all requests for claims payments that are within the scope of the mandate using accurate diagnosis codes specific to rape or sexual assault. For Blue Shield to apply the mandated cost share waiver, the treating provider must include the appropriate diagnosis code(s) from the list below (in the primary position) to indicate that the services are for emergency room medical care or follow up health care treatment for a patient who is treated following a rape or sexual assault. For any orders for prescription drugs that qualify for this cost-share waiver, the treating provider must include appropriate instructions with the prescription to allow the pharmacy to submit the applicable diagnosis code(s) at the time of claim processing. The diagnosis codes included in the list below should not be included with any benefit claims that do not qualify for the mandated cost-share waiver.

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State Law requires Blue Shield to provide coverage without cost sharing (including copayments, coinsurance, deductibles) for emergency room medical care and follow-up treatment¹ for a member who is treated following a rape or sexual assault for the first nine months² after the member initiates treatment. This coverage must be provided without requiring the member to file a police report or requiring charges against or conviction of an assailant. These requirements apply to in-network and out-of-network emergency services, in-network follow-up treatment, and out-of-network follow up treatment if timely access³ to in-network services is not available.

Diagnosis Code Set for Rape and Sexual Assault			
ICD-10 Diagnosis Code	ICD-10 Diagnosis Code Description	ICD-10 Diagnosis Code	ICD-10 Diagnosis Code Description
O9A411	Sexual abuse complicating pregnancy, first trimester	O9A419	Sexual abuse complicating pregnancy, unspecified trimester
O9A412	Sexual abuse complicating pregnancy, second trimester	O9A42	Sexual abuse complicating childbirth
O9A413	Sexual abuse complicating pregnancy, third trimester	O9A43	Sexual abuse complicating the puerperium
T7421XA	Adult sexual abuse, confirmed, initial encounter	T7451XD	Adult forced sexual exploitation, confirmed, subsequent encounter

¹ Follow up treatment is defined by State Law to include medical or surgical services for the diagnosis, prevention, or treatment of medical conditions arising from an instance of rape or sexual assault. Blue Shield will also extend the cost share waivers and other terms of coverage set forth under this policy to mental health and substance use disorder services.

² Blue Shield will not apply this nine-month limitation or any period of limitation for the cost share waivers and other terms of coverage set forth under this policy.

³ Timely access standards under Section 1317.1 of the Health and Safety Code and Section 10133.54 of the Insurance Code.

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Diagnosis Code Set for Rape and Sexual Assault			
T7421XD	Adult sexual abuse, confirmed, subsequent encounter	T7451XS	Adult forced sexual exploitation, confirmed, sequela
T7421XS	Adult sexual abuse, confirmed, sequela	T7452XA	Child sexual exploitation, confirmed, initial encounter
T7422XA	Child sexual abuse, confirmed, initial encounter	T7452XD	Child sexual exploitation, confirmed, subsequent encounter
T7422XD	Child sexual abuse, confirmed, subsequent encounter	T7452XS	Child sexual exploitation, confirmed, sequela
T7422XS	Child sexual abuse, confirmed, sequela	T7621XA	Adult sexual abuse, suspected, initial encounter
T7451XA	Adult forced sexual exploitation, confirmed, initial encounter	T7621XD	Adult sexual abuse, suspected, subsequent encounter
T7621XS	Adult sexual abuse, suspected, sequela	T7652XD	Child sexual exploitation, suspected, subsequent encounter
T7622XA	Child sexual abuse, suspected, initial encounter	T7652XS	Child sexual exploitation, suspected, sequela

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Diagnosis Code Set for Rape and Sexual Assault			
T7622XD	Child sexual abuse, suspected, subsequent encounter	Z0441	Encounter for examination and observation following alleged adult rape
T7622XS	Child sexual abuse, suspected, sequela	Z0442	Encounter for examination and observation following alleged child rape
T7651XA	Adult forced sexual exploitation, suspected, initial encounter	Z0481	Encounter for examination and observation of victim following forced sexual exploitation
T7651XD	Adult forced sexual exploitation, suspected, subsequent encounter	Z6981	Encounter for mental health services for victim of other abuse
T7651XS	Adult forced sexual exploitation, suspected, sequela	T7652XA	Child sexual exploitation, suspected, initial encounter

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Resources

- **American Medical Association**

<http://www.ama-assn.org/ama>

- **Centers for Medicare & Medicaid Services**

<http://www.cms.gov/>

- *Assembly Bill 2843 (2024)*
- *Health and Safety Code: 1317.1, 1367.37, 1367.03*
- *Insurance Code: 10133.54 and 10123.211*

Policy History

This section provides a chronological history of the activities, updates and changes that have occurred with this Benefit Policy.

Effective Date	Action	Reason
7-1-2025 (1-1-2025 for CALPERS)	New Policy Adoption	Benefit policy created
07/21/2025	Update of policy verbiage	Review

This Policy documents Blue Shield of California's benefit coverage guidelines for compliance with the identified legal mandate. Other factors may also impact benefit coverage, and this Policy is not a guarantee of coverage. All terms and conditions of a member's benefit plan apply for purposes of determining eligibility and coverage for benefits addressed in this Policy. This Policy is subject to change based on changes in applicable law, regulations, or other legal guidance; as new information becomes available; or for other reasons as determined by Blue Shield.