Health CHOICE

DID YOU KNOW?

- The Total OB package includes all OB visits prior to the delivery, the delivery, postpartum visits, and all services associated with admission to and discharge from a hospital for delivery.

- E/M codes for office and/or hospital visits may not be unbundled from the Total OB code and billed separately. Medical complications of pregnancy and medical complications of labor and delivery management may require additional resources and may be reported separately (e.g., diabetes, toxemia, hypertension, preterm labor, etc.).

Total Obstetrics Package:	CPT Code
Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care	59400
Routine obstetric care including antepartum care, cesarean delivery, and postpartum care	59510
Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/ or forceps) and postpartum care, after previous cesarean delivery	59610
Routine obstetric care including antepartum care, cesarean delivery, and postpartum care, following attempted vaginal delivery after previous cesarean delivery	59618
Antepartum & Postpartum Care (only):	**CPT Code**
Antepartum care only; 4 - 6 visits	59425
Antepartum care only; 7 or more visits	59426
Postpartum care only	59430
For 1 - 3 antepartum care visits, the appropriate E/M code(s) should be used.	
Delivery only:	*codes should be selected from the 59409 – 59622 range as applicable.*

REMEMBER: Per AHCCCS, **inductions and cesarean sections prior to 39 weeks' gestation *must be medically necessary*.** If the gestation period is less than 39 weeks, all obstetric deliveries will require a diagnosis condition code (ICD-10) to identify the week of gestation along with a diagnosis condition code indicating medical necessity.

CODING TIPS:

A code from category Z3A, Weeks of gestation, should be appended as an additional code to indicate the specific week of gestation of the pregnancy.

0500F (initial) or **0502F** (subsequent) should be used in addition to any applicable CPT code(s) to report **prenatal care visits.**

0503F should be used (in addition to any applicable CPT code(s)) to report **postpartum care visits**.

Postpartum follow-up care will not apply towards completion of the Postpartum Care HEDIS measure (for visits on or between 21 and 56 days after delivery) **unless 0503F is reported**.

COMMON POSTPARTUM CODE EXAMPLES*:

Z39.1 ....Encounter for care and examination of lactating mother [CPT code(s) include **0503F**]

Z39.2 ....Encounter for routine postpartum follow-up [CPT code(s) include **0503F**]

Z30.430 ...Encounter for insertion of intrauterine contraceptive device [CPT code(s) include **0503F**]

Z01.419 ....Encounter for gynecological examination (general) (routine) without abnormal findings [CPT code(s) include **0503F**]

COMMON PRENATAL CODE EXAMPLES*:

Z34.01 ....Encounter for supervision of normal first pregnancy, first trimester

Z34.02 ......Encounter for supervision of normal first pregnancy, second trimester

Z34.83 ....Encounter for supervision of other normal pregnancy, third trimester

* *Not an exhaustive list. Documentation should be as specific as possible and the most appropriate code selected accordingly.*

Health Choice offers case management services including a Neonatal Abstinence Program and high-risk pregnancy case management. For more information call the Stork Line at 800-828-7514.

TOB rules do not apply to FQHC/RHC. Contract terms should be applied.