



Coding for Maternity Services

Prenatal Care

The establishment of timely prenatal care is clearly associated with improved pregnancy outcomes.

Historically, women covered by Medicaid do not obtain prenatal care as early in pregnancy or see their providers as frequently as women with private insurance. Therefore, it is imperative to encourage continued prenatal services at each visit and to use every opportunity for patient education and evaluation.

Molina Healthcare uses the following HEDIS[®] guidelines to measure prenatal care compliance.

- Initiation of prenatal care – First visit within the first trimester or within 42 days of enrollment in the health plan
- Frequency of ongoing prenatal care for an uncomplicated pregnancy –
 - Visits every 4 weeks for the first 28 weeks of pregnancy
 - Visits every 2 – 3 weeks until 36 weeks of pregnancy
 - Visits weekly thereafter

Prenatal care visits should include at least one of the following, and services provided should be clearly documented in the medical record:

- A basic physical obstetrical exam that includes auscultation for fetal heart tone or measurement of fundus height
- Documentation of LMP or EDD in conjunction with either of the following:
 - Prenatal risk assessment and counseling/education; **or**
 - Complete obstetrical history
- Evidence that, along with the visit, a prenatal care procedure was performed, such as:
 - Screening test in the form of an obstetric panel; **or**
 - TORCH antibody panel; **or**
 - A rubella antibody test/titer with an Rh incompatibility (ABO/Rh) blood typing; **or**
 - Echography of a pregnant uterus

Note: Ultrasounds, pap tests, colposcopy and lab results alone are not considered a visit.

Postpartum Care

During the first few weeks after delivery, new mothers experience significant physical, emotional and social changes, while adjusting to caring for a newborn. A postpartum visit allows providers the opportunity to conduct a physical examination and to answer questions and provide guidance on issues such as nutrition and family planning.

Molina Healthcare uses HEDIS guidelines to measure postpartum visit compliance. The standard is a postpartum visit to an OB/GYN practitioner, or midwife, family practitioner, or other PCP for a pelvic exam or postpartum care on or between 21 and 56 days after delivery.

Documentation in the medical record must include the date when the postpartum visit occurred and at least one of the following:

- Pelvic exam; **or**
- Evaluation of weight, BP, breasts (notation of “breastfeeding” is acceptable for the evaluation of breasts component) and abdomen; **or**
- Notation of postpartum care, including, but not limited to the following:
 - Notation of “postpartum care”, “PP care”, “PP check”, “6 week check;” **or**
 - A preprinted “postpartum care” form in which information was documented during the visit

Note: Colposcopy alone is not considered a visit.

Well Care through the Perinatal Period

Consider providing an annual well exam for your patients in addition to prenatal or postpartum care. The services required for a well exam (health and developmental history, both physical and mental, a physical exam, and health education/anticipatory guidance) are often provided as part of the prenatal or postpartum exam, but may not have been coded in the past.

- Preventive services may be rendered on visits other than specific well care visits, regardless of the primary intent of the visit.
- Well visit and postpartum visit can be paid for the same office visit, provided that the appropriate procedure and diagnosis codes are included for both services.

Medicaid claims require separate, specific, non-bundled and non-global coding. **Please refer to the following OB/GYN Coding Reference for appropriate ICD-9, CPT and HCPCS codes for perinatal and well care services.** In order to accurately track compliance with these guidelines, it is imperative that appropriate coding be used to identify the services provided.

HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).

Questions?

If you have any questions, please call Molina Healthcare’s Provider Services Department at 1-800-642-4168 (TTY: 1-800-750-0750 or 711). Representatives are available to assist you from 8:00 a.m. to 5:00 p.m., Monday through Friday.