



Early Elective Deliveries

This announcement clarifies Home State Health's policy on early elective deliveries.

In accordance with MO HealthNet's Payment Policy for Early Elective Delivery (13 CSR 70-3.250), **effective June 1, 2015**, Home State Health will no longer reimburse for early elective deliveries or deliveries prior to 39 weeks gestational age that are not medically indicated. Those delivery-related services shall be denied or recouped by Home State Health. **Non-payment includes services billed by the delivering physicians/providers, delivering institutions, hospitals caring for newborns, and other providers associated with this non-covered service.**

Early elective delivery is defined as a delivery by induction of labor without medical necessity followed by vaginal or caesarean section delivery or a delivery by caesarean section before 39 weeks gestation without medical necessity. Vaginal or caesarean delivery following non-induced labor is not considered an early elective delivery regardless of gestational weeks.

GESTATIONAL AGE/DELIVERY INDICATOR REQUIRED

Field 19 of the CMS 1500 paper claim or Loop 2300, or 2400, NTE, 02 of the 837P, **MUST** contain a new "gestational age/delivery" indicator. **This field will be required for all claims that report a delivery or global prenatal/delivery procedure code.** The new field requires one of the following four (4) digit alphanumeric values. This field will be used to identify early elective deliveries. **If the value entered in the field contains a character that is not indicated below or is not in the format indicated, the value will be considered invalid and the claim will be denied.**

- **1st and 2nd digits** represent the gestational age, based on the best obstetrical estimate. They must be numeric characters and values from 20 through 42

- **3rd and 4th digits** represent the method of delivery. They must be one of following alpha characters:

- LV – Labor non-induced followed by vaginal delivery
- LC – Labor non-induced followed by caesarean delivery
- IV – induced labor followed by vaginal delivery
- IC – induced labor followed by caesarean delivery
- CN – caesarean delivery without labor, non-scheduled (i.e. add-ons)
- CS – caesarean delivery, scheduled

Delivery field value format DO's (delivering physician/provider claim can be processed)

38LV
32CS

39LC
28CN



An important
message from
Provider Relations



Delivery field value format DO NOT's (delivering physician/provider claim will be rejected)

38/LV
39 Weeks IV
PG0295815
37LC CORRECTED CLAIM
35LC TWIN DELIVERY

34CN 34CN
Blank field
40,IV
137LV

If the gestational age/delivery indicator contains an LV or LC value or contains a gestational age of 39 or greater, the claim will be exempt from editing and will continue processing through the system.

If the gestational age/delivery indicator contains IV, IC, CN, or CS, and the gestational age is less than 39, the claim will be subject to editing for early elective delivery. If one of the diagnoses on the claim indicates that there is a medical indication for an early delivery, the claim will be exempt and continue to process.

Home State uses Mo HealthNet's list of conditions from the American Congress of Obstetricians and Gynecologists (ACOG) that may be indications for early induction of labor and delivery to determine diagnosis codes that are appropriate to justify an early delivery.

Claims that have the IV, IC, CN, or CS indicator with a gestational age less than 39 weeks and no qualifying diagnosis for early induction of labor and delivery will be denied. Inpatient hospital claims (institutional and all physicians) related to denied delivering physician/provider claim will also deny or be recouped if already paid.

For additional information go to <http://dss.mo.gov/mhd> to view MO HealthNet's December 3, 2014 Provider Bulletin, Volume 37 Number 7.

➤ **Secure Portal Registration:** If you haven't already do so, please go to www.HomeStateHealth.com to register for our Secure Portal. Functions on the portal include: Verification of eligibility, submission of claims, entering authorizations, viewing patient care gaps, etc. Use of the portal is FREE for all services!

➤ **Electronic Funds Transfer / Electronic Remittance Advice**

- Home State Health Plan partners with PaySpan Health for EFT/ERA services.
- Please register with PaySpan Health at www.payspanhealth.com

Questions?

Contact Provider Relations at 1-855-694-4663.