



Prenatal and Postpartum Bonus Program & Changes in Obstetrical Billing Guidelines Effective April 30, 2017

Home State Health is excited to announce a new bonus program for our participating practitioners of obstetrical care. This program is designed to reward obstetrical providers with higher reimbursement for timely and adequate prenatal and postpartum visits. These bonuses will be added to your regular claims payment for prenatal and postpartum services. A \$200 bonus will be paid at the completion of 7 prenatal visits and a separate \$100 bonus will be paid for a single postpartum visit within 21 to 56 days of delivery.

As part of this program, individual claims must be submitted for all obstetrical services. Effective April 30, 2017, Home State Health will transition from allowing global billing for obstetrical care to allowing only individual billing for each obstetrical service. Beginning April 30, 2017 all global obstetrical billing codes (codes covering multiple office visits for prenatal and/or postpartum care with or without delivery) will be denied.

The bonus payments above more than exceed the difference between a global delivery payment rate and the combined payment rate of individual services during pregnancy.

Prenatal visits must be billed with the appropriate E&M code with modifier –TH to be eligible for the bonus payment. Postpartum visits within 21 to 56 days of delivery should be submitted using code 59430 with the modifier -TH. Postpartum visits outside of this time period should be submitted using the appropriate E&M code or 59430 without the modifier. See coding examples below.

Prenatal Care

99213-TH Use appropriate E&M code with –TH modifier (99213 is illustrative only)

\$200 bonus for 7 visits. Use above billing for all prenatal visits.

E&M codes without –TH modifier will be reimbursed normally but will not be eligible for bonus.

Global codes will be denied.

Delivery

59409 Vaginal Delivery Only
58514 Cesarean Delivery Only
59612 VBAC – Vaginal Delivery after Previous Cesarean
59620 Cesarean Delivery Only after attempted VBAC

Global codes will be denied.



An important
message from
Provider Relations



Postpartum Care

59430-TH Postpartum Care, performed 21 to 56 days from delivery
99213 or Use appropriate E&M code (99213 is illustrative only) or 59430 without
59430 TH modifier for postpartum care performed less than 21 or more than 56
days from delivery

*59430 without the modifier or E&M codes for postpartum care will be reimbursed normally but will not be eligible for bonus.
Global codes will be denied.*

If you have a Home State Health member that is currently receiving prenatal care and you were intending to bill using a global obstetrical code (codes covering multiple office visits for prenatal and/or postpartum care with or without delivery), please submit claims for any prenatal visits already provided with the appropriate coding as outlined above. These claims will not be denied for timely filing. Any global codes submitted on or after April 30, 2017 will be denied.

Our obstetric case management and care coordination staff wants to complement and support your efforts for Home State Health members in your office. We welcome your referrals. We offer medical and behavioral health case management as well as a myriad of other services tailored for obstetric patients including your highest risk individuals.

➤ **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.