

## **CPT® category II code reimbursements**

Please note, this communication applies to Anthem HealthKeepers Plus Medicaid products offered by HealthKeepers, Inc.

HealthKeepers, Inc. is introducing a new Quality Reimbursement Program for Anthem HealthKeepers Plus providers. Coding for CPT<sup>®</sup> II category codes for the first prenatal visit and the postpartum visit will also be reimbursed at \$10 per code.

CPT<sup>®</sup> II codes are supplemental tracking codes that are used to measure quality performance. The use of these tracking codes decreases the need for record submissions and chart reviews, minimizing administrative burden on physicians and other healthcare professionals.

In addition, the postpartum CPT<sup>®</sup> II code will provide a necessary linkage to care so that our Medicaid community doulas are able to receive an additional incentive payment when the member sees her OB/GYN, midwife, nurse practitioner, or physician assistant for her postpartum visit.

## How to use CPT II codes

Use these CPT<sup>®</sup> II codes when submitting a claim. In field 24F on the *CMS-1500* claim form, enter the CPT<sup>®</sup> II code along with the amount of \$10. To receive reimbursement, the exact dollar amount (\$10) and the date of service must be entered on the claim along the with appropriate code for the service performed referenced below in the postpartum care visit section:

- **First prenatal visit 0500F:** Initial prenatal care visit (report at first prenatal encounter with a healthcare professional providing obstetrical care. Report also date of visit, and in a separate field, the date of the last menstrual period (LMP). The prenatal care visit must occur within the first trimester or within 42 days of enrollment with HealthKeepers, Inc.
- **0501F** Prenatal flow sheet documented in medical record by first prenatal visit (documentation includes at a minimum blood pressure, weight, urine protein, uterine size, fetal heart tones, and estimated date of delivery). Report the date of the visit and, in a separate field, the date of the last menstrual period (LMP). (Note: If reporting 0501F Prenatal flow sheet, it is not necessary to report 0500F Initial prenatal care visit). The prenatal care visit must occur within the first trimester or within 42 days of enrollment with HealthKeepers, Inc.

Postpartum care visit:

0503F — Postpartum care visit to an OB/GYN or other prenatal care practitioner, or PCP on or between 7 and 84 days after delivery. Do not include postpartum care provided in an acute inpatient setting. Submit claim with CPT<sup>®</sup> category code 0503F and a diagnosis code of Z39.2. The diagnosis code of Z39.2 for 0503F must be identified as the primary diagnosis on the claim.

Take advantage of this great revenue opportunity by enhancing your billing processes. Thank you for delivering health and wellness care to our members.

https://providers.anthem.com/va

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To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the right or via our online form (**anthem.ly/VAmp**).

