

June 24, 2014

Montana Health Care Programs Notice

Hospitals and Birthing Centers

Elective Deliveries

Effective July 1, 2014, all facilities must have a “hard-stop policy” in place regarding non-medically necessary inductions prior to 39 weeks, and non-medically necessary Cesarean sections at any gestational age. The policy must contain the following:

- No non-medically necessary inductions and Cesarean sections prior to 39 weeks and 0/7 days gestation, and no non-medically necessary Cesarean sections at any gestational age.
- Confirmation of weeks gestation by ACOG guidelines (at least one of the following guidelines must be met to show gestational age):
 - Fetal heart tones have been documented for 20 weeks by non-electronic fetoscope or 30 weeks by Doppler.
 - 36 weeks since a positive serum or urine pregnancy test that was performed by a reliable laboratory.
 - An ultrasound prior to 20 weeks that confirms the gestational age of at least 39 weeks.
- If pregnancy care was not initiated prior to 20 weeks gestation, the gestational age may be documented from first day of the last menstrual period (LMP).
- Policy must have a multistep review process prior to all inductions and Cesarean sections including final decision being made by the Perinatology Chair/Obstetrical Chair, OB Director, or Medical Director.

Effective October 1, 2014, Montana Medicaid will reduce reimbursement rates for non-medically necessary inductions prior to 39 weeks, and non-medically necessary Cesarean sections at any gestational ages. All hospital claims with an admit date on or after October 1, 2014, will require coding changes to delivery claims.

Hospital inpatient claims and birthing center claims will require the use of condition codes for all induction and Cesarean section deliveries. These claims will be reviewed for medical necessity based on an approved list of diagnosis codes. Conditions codes are noted in fields 18–28 on the UB-04.

The condition codes are:

- 81 – Cesarean section or induction performed at less than 39 weeks gestation for medical necessity.
- 82 – Cesarean section or induction performed at less than 39 weeks gestation electively.
- 83 – Cesarean section or induction performed at 39 weeks gestation or greater.

Beginning July 1, 2014, delivery claims can be submitted with these coding changes and any births that would receive reduced reimbursement beginning October 1, 2014, will have a reason and remark code on the remittance advice but will not have any reimbursement reductions. This is being implemented early to assist providers with making the changes prior to any reimbursement reductions take effect. All delivery

claims with an admit date on or after October 1, 2014, will require the above coding changes.

Contact Information

If you have any questions, please contact Jennifer Rieden at 406-444-7018.

For claims questions or additional information, contact Provider Relations at 1-800-624-3958 (toll-free, in/out of state) or 406-442-1837 (Helena) or via e-mail at MTPRHelpdesk@xerox.com.

Visit the Montana Medicaid Provider Information website at <http://medicaidprovider.hhs.mt.gov>.