



BCAREV

Billing, Coding, Auditing, Revenue Cycle Training by BCA



Tough Topics #6
OB Diagnosis Coding

Objectives

- 1 OB Ground rules
Guidelines
- 2 Three categories of OB patients
Normal, High Risk, Complicated
- 3 UDS Measures Pertaining to Obstetrics
- 4 Healthy People 2030 Objectives

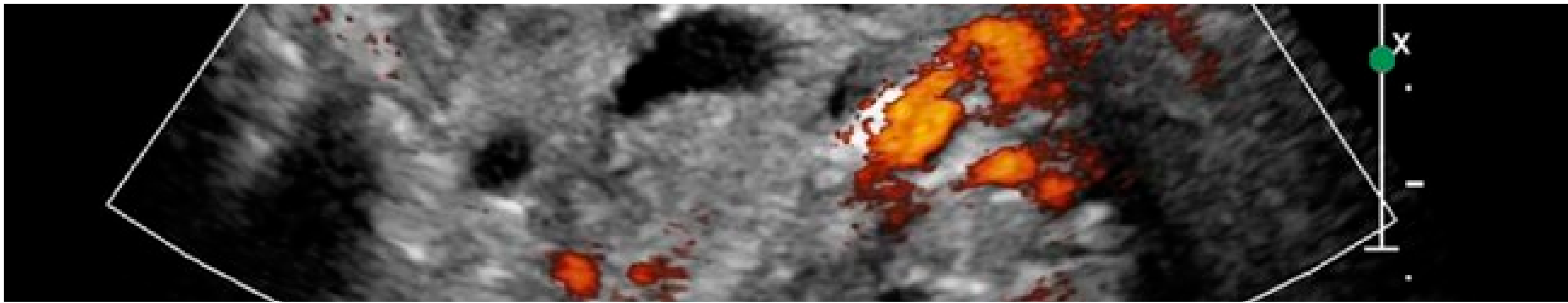
Five Basic Diagnosis Coding Rules

- 1 The 1st listed dx identifies condition requiring the greatest work-effort as determined by the clinician and supported in the medical record.
- 2 Document all conditions that require/affect care.
- 3 Document reasons for all studies.
- 4 Code to the highest level of specificity known.
- 5 Do not use “rule out” or unconfirmed diagnoses; instead, report known signs and symptoms.

Guidelines – I.C.15.a.1

- 1 Chapter 15 codes have sequencing priority over codes from other chapters.
- 2 Additional codes may be used in Conjunction with Chapter 15 codes to further specify conditions.
- 3 Should the provider document that the pregnancy is incidental to the encounter, use code Z33.1 Pregnant state, incidental.
- 4 **It is the provider's responsibility to state that the condition being treated is not affecting the pregnancy.**





Guidelines – Section I.C.15.b.1&2

1. For routine outpt prenatal visits when no complications are present, a code from category Z34, Encounter for supervision of normal pregnancy, should be 1st listed. Don't use with a Chapter 15 code.
2. Codes from O09 Supervision of high-risk pregnancy, are only for use during the prenatal period. O09, if used, will always be first-listed. Can be used with other codes from Chapter 15 (if other complications exist).
*Also provides instruction for labor and delivery episode of care.



Tabular List Guidance for Chapter 15

Note

Codes from this chapter are for use for conditions related to or aggravated by the pregnancy, childbirth, or by the puerperium (maternal causes or obstetric causes)

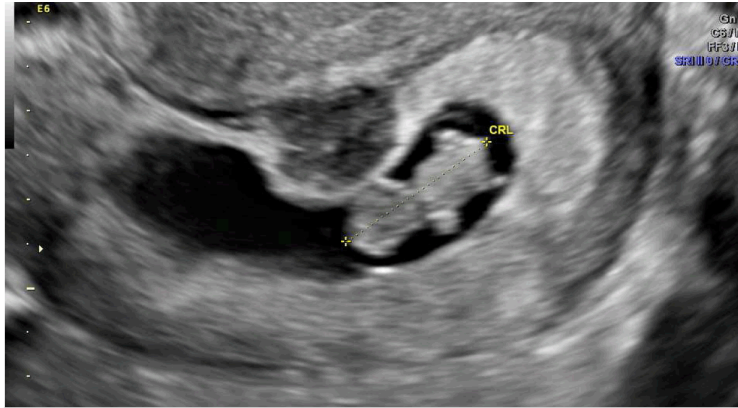
Note

Trimesters are counted from the first day of the last menstrual period. They are defined as follows:

- 1st trimester – less than 14 weeks 0 days
- 2nd trimester – 14 weeks 0 days to less than 28 weeks 0 days
- 3rd trimester – 28 weeks 0 days until delivery

Use additional code from category Z3A, Weeks of gestation, to identify the specific week of the pregnancy, if known.

Categories



Normal (Healthy
with no concerns)



High risk (no
current
complications, but
at increased risk)



Complicated
(present disease or
complication)

Translating ICD-10 to Clinician-Speak



Clinician says High-Risk Pregnancy
– usually means complications

ICD-10-CM says High-Risk Pregnancy –
means no complication of this sort yet,
but carefully watching because of
factors that increase probability

Options For Supervision Of Normal



Z34.0 Encounter for supervision of normal first pregnancy

Choose 5th character based on trimester

Ok to reference OB chart to determine weeks, trimester

Think Gravida 1



Z34.8- Encounter for supervision of other normal pregnancy

Choose 5th character based on trimester

Ok to reference OB chart to determine weeks, trimester

Other than Gravida 1



Z34.9- Encounter for supervision of normal pregnancy, unspecified

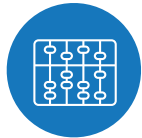
Avoid where possible



Do We Need Z3A With Normal Pregnancy?



ICD-10-CM is silent on instruction for this question



States yes for O09-O60, O80-O82



States no for O00-O08 and Z33.2



Does it add value?



Subcategories for Supervision of High Risk

History of infertility

Grand multiparity

History of ectopic pregnancy

Elderly/young multigravida/primigravida

History of molar pregnancy

Social problems

History of pre-term labor

Resulting from assisted reproductive technology

Other poor reproductive or obstetric history

History of in utero procedure during previous pregnancy

Insufficient antenatal care



High-Risk Examples

G2P1 with previous pre-term labor, need to monitor this pregnancy carefully for signs of early labor. May need to use progesterone or other options to ensure this pregnancy doesn't have pre-term labor and delivery. No signs whatsoever of any issue in this first trimester. Reviewed obstetric care instructions in order to minimize risks.

- 009.211 Supervision of pregnancy with history of pre-term labor, first trimester

High-Risk Examples

Pt presents at 22 weeks per ultrasound with insufficient prenatal care up to this point. She has missed standard early screenings, concerns for possible issues related to lack of PNV, iron. Doesn't recall any events where she would have consumed more than one drink of alcohol, not even sure she drank anything during the pregnancy. Can't be certain. Will go ahead and do quad screen, glucose tolerance tests and get detailed anatomic US.

009.32 Supervision of pregnancy with insufficient antenatal care, second trimester



High-Risk Examples

22 yof here for OB care at 30wks. Feeling well, no physical concerns but does mention issues finding food. Living in tent city, sometimes able to get to food kitchens, but not always. Hard to carry food items back on foot. Drinking water also an issue. Paired with Community Resource Liaison for assistance. Fetal growth looks good per last US, will continue to monitor for any nutritional problems.

- O09.73 Supervision of high risk pregnancy due to social problems, third trimester
- Z59.41 Food insecurity
- Z58.6 Inadequate drinking-water supply

A photograph of a hospital room. In the foreground, a person in a white lab coat is holding a newborn baby wrapped in a yellow blanket. Another person in a white lab coat is standing next to a metal baby crib. In the background, there is a window and a framed picture on the wall. A blue semi-transparent box is overlaid on the right side of the image, containing text.

What If The Complication Develops?

Example: Supervision of young primigravida

- Pelvis is insufficient during labor, must proceed to cesarean
- Remove supervision code, report complication

What If The Complication Never Develops?

- Report supervision of high risk until delivery
- Report O80 at delivery episode of care



A Few Examples Of Complications

01

Hyperemesis gravidarum

02

Pre-existing DM

03

Gestational DM

04

UTI in pregnancy

05

Breech presentation



Some Complications Can Return To Normal



Hyperemesis gravidarum

UTI or other infection in pregnancy

Back pain complicating pregnancy



Some Complications Require Additional Codes

01

- O24.0-O24.3 Pre-existing diabetes mellitus
- Use additional code from category E10/E11 to further identify any manifestations

02

- O10 Pre-existing hypertension
- No additional code needed for essential HTN
 - Complex forms of HTN need I11-I13 code

Substance Use in Pregnancy (I.C.15.I.1-3)

1

ANY substance use in pregnancy is a complication of pregnancy

2

O99.31- Alcohol use complicating pregnancy
A secondary code from F10 should also be assigned...

3

O99.32- Drug use complicating pregnancy
A secondary code from F11-F16 and F18-F19 should also be assigned....

4

O99.33- Tobacco use complicating pregnancy
A secondary code from F17 should also be assigned...



No HCC Risk Adjustment for Chapter 15 codes



Pre-existing conditions, substance abuse/dependence may risk adjust

CDPS Value exists

UDS Measures Affected by Obstetrics

Clinical Data	2016	2017	2018	2019	2020
Prenatal					
Number of Prenatal Care Patients	559,848	573,026	563,740	583,328	551,990
Number of Prenatal Care Patients who Delivered	295,913	299,373	300,100	312,956	299,442
Perinatal Health					
Early Entry into Prenatal Care (first visit in first trimester)	74.06 %	73.97 %	73.82 %	73.81 %	73.48 %
Number of Access to Prenatal Care (First Prenatal Visit in 1st Trimester)	414,605	423,872	416,147	430,566	405,628
% Low and Very Low Birth Weight	7.80 %	8.03 %	8.00 %	8.05 %	8.18 %
Number of Newborns with Low Birth Weight	22,989	24,023	23,951	25,011	24,403

Healthy People 2030 Objectives

Pregnancy and Childbirth — General

[Reduce the rate of fetal deaths at 20 or more weeks of gestation — MICH-01](#)

⋮ Baseline only

[Increase the proportion of women who get screened for postpartum depression — MICH-D01](#)

⚙️ Developmental

[Increase the proportion of pregnant women who receive early and adequate prenatal care — MICH-08](#)

⊕ Improving

[Reduce preterm births — MICH-07](#)

⊖ Getting worse

[Increase the proportion of women who had a healthy weight before pregnancy — MICH-13](#)

⊖ Getting worse

Healthy People 2030 Objectives

Drug and Alcohol Use

[Increase abstinence from alcohol among pregnant women — MICH-09](#)

⋮ Baseline only

[Increase abstinence from illicit drugs among pregnant women — MICH-11](#)

⋮ Baseline only

[Reduce the proportion of women who use illicit opioids during pregnancy — MICH-D02](#)

⚙ Developmental

Tobacco Use

[Increase abstinence from cigarette smoking among pregnant women — MICH-10](#)

+ Improving

[Increase successful quit attempts in pregnant women who smoke — TU-15](#)

□ Little or no detectable change

Healthy People 2030 Objectives

Family Planning

[Reduce the proportion of unintended pregnancies — FP-01](#)

Baseline only

[Reduce the proportion of pregnancies conceived within 18 months of a previous birth — FP-02](#)

Baseline only

[Reduce pregnancies in adolescents — FP-03](#)

Baseline only

[Increase the proportion of women at risk for unintended pregnancy who use effective birth control — FP-10](#)

Baseline only


[Increase the proportion of adolescent females at risk for unintended pregnancy who use effective birth control — FP-11](#)

Baseline only


Healthy People 2030 Objectives

Women


[Reduce cesarean births among low-risk women with no prior births — MICH-06](#)

 Improving


[Reduce maternal deaths — MICH-04](#)

 Baseline only

[Reduce severe maternal complications identified during delivery hospitalizations — MICH-05](#)

 Baseline only

[Increase the proportion of women of childbearing age who get enough folic acid — MICH-12](#)

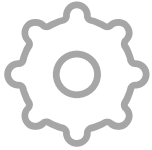
 Baseline only

Vaccination

[Increase the proportion of women who get the Tdap vaccine during pregnancy — IID-D01](#)

 Developmental

OB Dx Take-Homes



Understand and apply ICD-10-CM Guidelines



Educate clinicians regarding responsibility with “incidental pregnancy”



Allow OB Record to influence coding for weeks of gestation



Translate “High-Risk” appropriately

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