HIGHMARK CODING TIPS

October, 2019

Urinary Incontinence Therapy Services

Urinary incontinence therapy consists of various behavioral, exercises, and physical medicine techniques designed to alleviate urinary incontinence by enabling the patient to gain voluntary control over the discharge of urine.

The initial evaluation of patients with urinary incontinence must be performed by a physician and billed with the appropriate Evaluation and Management (E&M) code (99201-99205) New Patient, (99241-99245) Office or Outpatient Consultants, (99251-99255) Inpatient Consultants. E&M codes and occupational therapy codes 97110, 97530 are not be reported on the same day by the same provider for therapy services, unless significant separately identifiable as evidenced by documentation.

According to the American Medical Association (AMA) Current Procedural Terminology (CPT), codes 90901, 90912, or 90913 is to be reported for biofeedback.

As per the procedure code definition, biofeedback training 90912 or 90913, includes the measurement of the muscle movements done by electromyography (EMG codes 57184 and 57185) or manometry (91122).

Billing code 90901 includes no measurement (done without EMG or manometry) and is used only for coaching the patient in strengthening the pelvic floor muscles. Code 90901 is bundled into 90912 and 90913, with no unbundling allowed. Procedure code 90912 and 90913 are more involved than 90901.

There are some services that may be performed along with the biofeedback therapy that are not included in 90912 or 90913 codes. These include 97014, 97032 and 97035:

- Electrical stimulation of the pelvic floor is reported by 97014 (unattended) or 97032 (attended, each 15 minutes)
- Ultrasound of the pelvic floor is reported by 97035.

Global Maternity Care

In accordance with guidelines set forth by the American Medical Association (AMA) Current Procedural Terminology (CPT) and the American Congress of Obstetricians and Gynecologists, Highmark reimburses at a single, global contract rate for an uncomplicated maternity case when all services have been provided by one provider or group. These services, which include antepartum, delivery, and postpartum care, are not to be reported separately.

The 4 global, obstetric procedure codes are:

59400	VAGINAL DELIVERY
59510	CESAREAN DELIVERY
59610	VAGINAL DELIVERY AFTER PREVIOUS CESAREAN DELIVERY
59618	ATTEMPTED VAGINAL DELIVERY AFTER PREVIOUS CESAREAN DELIVERY

Note:

- This information is applicable to Plans with maternity benefits.
- Physicians will be reimbursed separately for the first visit to confirm pregnancy from the "global maternity care" and should submit a claim for this service at the time of the initial obstetric visit. Claims should include delivery date. All subsequent office visits for maternity care and delivery are considered part of the "global maternity care" package reimbursement and claims should be submitted after delivery and conclusion of postpartum services.

Antepartum Care Services Include:

- Prenatal history and examination and subsequent obstetrical visits
- Monthly visits to 28 weeks gestation
- Biweekly visits to 36 weeks gestation
- Weekly visits until delivery
- Obtaining the patient history (including the initial history and any subsequent history)
- Obtaining and recording the weight, blood pressure and any fetal heart tones
- Routine Chemical urinalysis

Delivery Services Include:

- Admission to hospital
- Admission history and physical examination
- Management of uncomplicated labor
- Vaginal delivery (with or without episiotomy, with or without forceps), or
- Cesarean delivery

Postpartum Care Services Include:

- Hospital visits
- Office visits following Vaginal or Cesarean delivery

Services **NOT** included in the global package include (but are not limited to):

- Laboratory Tests
- Amniocentesis
- Ultrasounds

Excluded services will have cost sharing applied and billed separately.

For further information on appropriate coding of obstetric care, please consult Highmark Reimbursement Policy RP-023 and/or the Provider Manual Chapter 1 (Units 2 and 4), Chapter 2 (Units 1, 3, and 4), Chapter 4 (Units 1 and 3), Chapter 5 (Units 1, 2, and 6), and Chapter 6 (Unit 3).