

SPECIAL eBULLETIN

FOR PROFESSIONAL PROVIDERS

SEPTEMBER 01, 2021

CPT-CAT-II CODES USED FOR STAND-ALONE PRENATAL AND POSTPARTUM VISITS

The CPT-CAT-II codes below can be submitted by an obstetrician/gynecologist (OB/GYN) specialist, Primary Care Physician (PCP), or other prenatal provider for prenatal/postpartum care events for members who delivered a live birth between October 8, 2020 and October 7, 2021. This will assist in closing Healthcare Effectiveness Data Information Set (HEDIS®) gaps, avoid the need for medical records, and provide Highmark with quality tracking.

Codes for prenatal care should begin in the first trimester and codes for postpartum care should occur 7-84 days post-delivery.

LIST OF CPT-CAT-II PRENATAL/POSTPARTUM CARE CODES

The codes below have been identified by the National Committee for Quality Assurance (NCQA) as acceptable for the Prenatal/Postpartum Care Measure.

VALUE SET NAME	CODE	DEFINITION
Stand Alone Prenatal Visits	0500F	Initial prenatal care visit (report at first prenatal encounter with health care professional providing obstetrical care. Report also date of visit and, in a separate field, the date of the last menstrual period [LMP] (Prenatal)
Stand Alone Prenatal Visits	0501F	Prenatal flow sheet documented in medical record by first prenatal visit (documentation includes at minimum blood pressure, weight, urine protein, uterine size, fetal heart tones, and estimated date of delivery). Report also: date of 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) (Prenatal)
Stand Alone Prenatal Visits	0502F	Subsequent prenatal care visit (Prenatal) [Excludes: patients who are seen for a condition unrelated to pregnancy or prenatal care (e.g. An upper respiratory infection; patients seen for consultation only, not for continuing care)]
Postpartum Visits	0503F	Postpartum care visit

NOTE: The clinical information provided is intended to aid in the understanding of the Prenatal/Postpartum Care Measure. It is not intended to interfere with clinical or coding judgment.

