

# PROVIDER NOTICE

Provider Relations Department: 888-895-4998 (Option 4)

## New OB Reimbursement Policy

**Effective Date:** July 15, 2024

**Health Plans Affected:** Priority Partners

**Type of Change:** Reimbursement

### Explanation of Change:

Johns Hopkins Health Plans has released its notification of a new reimbursement policy applicable only to Priority Partners:

#### **(RPC.008) PPMCO Obstetrical Services, Professional – New**

- Policy applies only to Priority Partners claims, for professional Obstetrical (OB) services, rendered to our members for maternity care and delivery services, reported to Johns Hopkins Health Plans.
- Providers must be actively enrolled in [ePREP\\*](#) when services are rendered.
- Providers shall not report global obstetric (maternity care) package code(s) or the claim will be denied.
- Johns Hopkins Health Plans considers the postnatal/postpartum period to be 12 weeks (84 days) after delivery.
- Providers are to report the appropriate obstetric abdominal/pelvic ultrasound codes in conjunction with an OB diagnosis or the claim may be denied.
- Doula services are covered in accordance with [MDH guidelines\\*](#) and Johns Hopkins Health Plans will reimburse Doula services in alignment with MDH's reimbursement model.
- Eligible providers may add the code 99078 (group educational services by physician) up to TEN Centering Pregnancy perinatal visit claims for patients who are enrolled in and receive perinatal care.
- Johns Hopkins Health Plans encourages providers to discuss the [Priority Partners Pregnancy Support Program](#) with their patients for additional pregnancy support.

#### REFERENCES\*:

- [American College of Obstetricians and Gynecologists \(ACOG\)](#)
- [ICD-10-CM Official Guidelines for Coding and Reporting](#)
- [Maryland Dept. of Health- Provider Information](#)
- [PPC - Prenatal and Postpartum Care | Johns Hopkins Medicine](#)
- [Maryland Medicaid Provider Program Resources and Fee Schedules](#)
- [Maryland Medicaid Factsheet #7: OBGYN](#)
- [Medicare Claims Processing Manual CH. 26- Completing and Processing Form CMS-1500 Data Set](#)

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To view the full policy on the effective date, please go to: **[HopkinsHealthPlans.org](https://HopkinsHealthPlans.org)** > **For Providers > Policies > [Reimbursement Policies](#)**

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