



AABC Webinar – “Notes that Pay Off”

Diagnoses, Codes, and Guidelines

- **Maternity Care Diagnoses**
- **Gestational Status Codes**
- **ICD-10 Codes for Social Determinants of Health (SDOH)**
- **ICD-10 Codes for Newborn Care**
- **Labor Management**
- **New Delivery Codes and Guidelines**



Maternity Care Diagnoses

Z34 Family of Codes for: Encounter for supervision of normal pregnancy

Requires extension, 4th digit, for first pregnancy or other pregnancy

Requires extension, 5th digit, for trimester

Z34.0 Encounter for supervision of normal first pregnancy
 Z34.00 unspecified trimester (rarely used, except for when you don't know)
 Z34.01 1st trimester
 Z34.02 2nd trimester
 Z34.03 3rd trimester

Z34.8 Encounter for supervision normal other pregnancy
 Z34.80 unspecified trimester (rarely used, except when you don't know)
 Z34.81 1st trimester
 Z34.82 2nd trimester
 Z34.83 3rd trimester

Z34.90 unspecified as to first or other pregnancy
 Z34.91 1st trimester
 Z34.92 2nd trimester
 Z34.93 3rd trimester

Z32.0 Encounter for pregnancy test

O09. Supervision of high-risk pregnancy (choose required digits)

O00-O08	Family of codes	Pregnancy abortive outcome
O09-O09	Family of codes	Supervision of high-risk pregnancy
O10-O16	Family of codes	Edema, proteinuria and hypertensive disorders in pregnancy, childbirth, and the puerperium
O20-O29	Family of codes	Other maternal disorders predominantly related to pregnancy
O30-O48	Family of codes	Maternal care related to the fetus and amniotic cavity and possible delivery problems
O60-O77	Family of codes	Complications of labor and delivery
O80-O82	Family of codes	Encounter for delivery
O85-O92	Family of codes	Complications predominantly related to the puerperium
O94-O9A	Family of codes	Other obstetric conditions, not elsewhere classified

Always check for extra digits required for specificity.

Gestational Status Codes

Z3A.00	Unspecified weeks or less than 8 wks.	Z3A.26	Gestational Age 26 wks.
Z3A.08	Gestational Age 8 wks.	Z3A.27	Gestational Age 27 wks.
Z3A.09	Gestational Age 9 wks.	Z3A.28	Gestational Age 28 wks.
Z3A.10	Gestational Age 10 wks.	Z3A.29	Gestational Age 29 wks.
Z3A.11	Gestational Age 11 wks.	Z3A.30	Gestational Age 30 wks.
Z3A.12	Gestational Age 12 wks.	Z3A.31	Gestational Age 31 wks.
Z3A.13	Gestational Age 13 wks.	Z3A.32	Gestational Age 32 wks.
Z3A.14	Gestational Age 14 wks.	Z3A.33	Gestational Age 33 wks.
Z3A.15	Gestational Age 15 wks.	Z3A.34	Gestational Age 34 wks.
Z3A.16	Gestational Age 16 wks.	Z3A.35	Gestational Age 35 wks.
Z3A.17	Gestational Age 17 wks.	Z3A.36	Gestational Age 36 wks.
Z3A.18	Gestational Age 18 wks.	Z3A.37	Gestational Age 37 wks.
Z3A.19	Gestational Age 19 wks.	Z3A.38	Gestational Age 38 wks.
Z3A.20	Gestational Age 20 wks.	Z3A.39	Gestational Age 39 wks.
Z3A.21	Gestational Age 21 wks.	Z3A.40	Gestational Age 40 wks.
Z3A.22	Gestational Age 22 wks.	Z3A.41	Gestational Age 41 wks.
Z3A.23	Gestational Age 23 wks.	Z3A.42	Gestational Age 42 wks.
Z3A.24	Gestational Age 24 wks.	Z3A.43	Gestational Age 43 wks.
Z3A.25	Gestational Age 25 wks.		

***Never list these first, they are additional descriptors sequenced after the primary diagnosis(es).**

ICD-10 Codes for Social Determinants of Health (SDOH)

- Never a principle or first-listed diagnosis code.
- Meant to support or be a secondary diagnosis, never the primary reason for treatment.
- Documentation must support how the SDOH impact health or treatment

See CMS SDOH Z Code Guide:

<https://www.cms.gov/files/document/cms-2023-omh-z-code-resource.pdf>

Housing and Economic Circumstances

Z59.0	Homelessness	Unspecified, Sheltered, or Unsheltered
Z59.1	Inadequate Housing	Poor heating/utilities
Z59.41	Food Insecurity	
Z59.81	Housing Instability	With or Without Risk of Homelessness
Z59.82	Transportation Insecurity	
Z59.86	Financial Insecurity	
Z59.87	Material Hardship	

Education and Employment

Z55	Problems Related to Education and Literacy
Z65	Problems Related to Employment

Social Environment and Support

Z60	Problems Related to Social Environment (living alone, acculturation)
Z62	Problems Related to the Upbringing (inadequate parental supervision)
Z63	Other Problems in Support Group (discord, dependent relative needs)

Psychosocial and Legal Circumstances

Z64	Problems Related to Psychosocial Circumstances (unwanted pregnancy)
Z65	Problems Related to Other (victim of crime, imprisonment)

ICD-10 Codes for Newborn Care

Health examination for newborns (under 8 days)

Z00.110 with no abnormal findings

Health examination for newborns (8-28 days)

Z00.111 with no abnormal findings

Newborns with complications

ICD-10 Category P00-P96

P03.9 Newborn affected by complications of labor & delivery, unspecified

P03.89 Newborn affected by other specified complications labor & delivery

P01 Category codes of newborn affected by maternal complications

P01.1 Newborn affected by premature rupture of membranes

Liveborn status of newborn **Z38.1** **Single liveborn infant, born outside hospital**

Stillbirth **P95** **List code for specificity if known**

Labor Management

New Labor Management Codes

- 59080** Initial day labor management; straightforward, per (calendar) day
- 59081** complex, per (calendar) day
- 59082** Subsequent day labor management; straightforward, per (calendar) day
- 59083** complex, per (calendar) day

Labor Management Guidelines

Labor management involves integrated decision making to assess, support and balance the well-being of the pregnant person who is in labor or preparing to be in labor and fetus(es), including medical conditions or complications (e.g., neurological conditions, diabetes, hypertension, preeclampsia, abnormal fetal heart tracings, labor dystocia). The goal of labor management is to optimize the pregnant person and fetal well-being to achieve the delivery of the fetus.

Interim physical examinations and collection and interpretation of physiologic data (e.g., partograms, tocometric data, vital signs, pulse oximetry, and induction/augmentation of labor (e.g. mechanical cervical dilation/ripening methods, prostaglandins, oxytocin, amniotomy), are included in labor management and cannot be separately reported.

- The codes require a face-to-face encounter with the pregnant person.
- The codes are reported **once per calendar date**.
- Multiple visits occurring by the same provider or same group practice over the course of a single calendar date in the same setting are reported as a single labor management service.
- A continuous visit (i.e., requiring continuous personal provider attendance at the bedside or elsewhere on the floor or unit focused on single pregnant person) that spans the transition of two calendar dates is a single service and is reported as a single labor management on one of two calendar dates.
- When certified nurse-midwives and PAs are working with physicians, they are considered as working in the exact same specialty and subspecialty as the physician.

Labor Management (cont.)

- **59080, 59081** includes all the work of the **Evaluation and Management (E/M)** for admission to the facility or assessment of labor.
- **59080, 59081 Initial day labor management** may only be reported **once per setting** using the highest level (i.e., straightforward or complex) of labor management provided on that calendar date. Initial day of labor management can only be reported when **one** of the following criteria is met:
 - The first date that the pregnant person requires labor management services or induction begins
 - The provider has not provided labor management services during the same facility admission and stay
 - The pregnant person is transferred to a new facility after receiving labor management in a previous setting.
- **59082, 59083 Subsequent day labor management** may be reported on **several calendar dates** if the treatment by the provider is intended to result in delivery.
- **59082, 59083 Subsequent day labor management** may be reported **once per calendar date** using the highest level (i.e., straightforward or complex) of labor management services on:
 - Each calendar date subsequent to the initial date labor management service, and the pregnant person does not meet the criteria for initial labor management
 - The calendar date of delivery, provided that labor management services are performed.

New Delivery Codes and Guidelines

Vaginal Birth

- 59431** Vaginal delivery with or without episiotomy;
(Vaginal breech should add Modifier 22; Multiples bill separately)
- 59432** after previous c-section
- 59414** Delivery of placenta only (separate procedure)
- 59300** Repair of 1st or 2nd degree laceration when performed by other than attending provider (separate provider)
- 59433** Repair of episiotomy or laceration; 3rd degree
- 59434** 4th degree

Delivery Guidelines

Delivery care begins when labor is complete (presenting part of the fetus is visible and firmly rimmed by the introitus or interrupted (e.g., arrest of labor is diagnosed and a subsequent decision for cesarean delivery is made)). Can be reported on the same day as initial or subsequent labor management even when the same provider provides both.

Includes:

- Vaginal delivery of both the pregnant person and fetus(es)
- If managed by the delivery provider/group:
 - Episiotomy
 - Repair of 1st and 2nd degree episiotomy or laceration
 - Placenta delivery
 - Postpartum care the calendar date of delivery