

Reporting confirmation of pregnancy visit

The initial provider visit confirming pregnancy is not always part of the global maternity care service. For example, if a patient only had a positive home pregnancy test, you could have a short E/M visit to confirm the pregnancy as long as the OB record is not initiated at that visit.

The confirmation of pregnancy could be a minimal visit, and might not involve face to face contact with the physician (for an established patient).

The global obstetric care begins when an antepartum service is provided, or the obstetric record is initiated as part of the physician's obstetric work up.

Here are some examples:

A patient had a positive pregnancy test at home, presents to the MD office to confirm her pregnancy – this visit may be reported with the appropriate E/M service code. If the OB record is initiated at that visit, it becomes part of the global package and is not separately billable.

If the pregnancy was confirmed by another provider or medical facility, the first pregnancy visit at your office becomes part of the global package.

Relevant ICD-10 codes

Pregnancy test negative Z32.02

Pregnancy test positive Z32.01

Pregnancy test unknown Z32.00

Not all payers follow cpt guidelines on global obstetric package. Always check with your specific payer for their definition of the global obstetric package. Keep in mind that deciding when to initiate the global OB care depends on the physician's medical judgment, clinical circumstances and the payer reimbursement policies.